

## LAB Dept MEETING – Huddles

**Date of Meeting:** 9/13/2018

**Attendees:** Alan Dandridge, Juliet Garlejo, Raquel Lecaro, Lourdes Maniago, Maria Villafuerte, Rizza Alcorido, Greg Johnson, Michelle Trammell, Mark Gomez, Elliott Faure, Melanie Magee, Juanita Fernandez

Topic	Details	Action Item, responsible person, date due, or informational only
KUDOS SAFETY TIP	<ul style="list-style-type: none"> <li>• Safety- See something, say something! See below attachment. Be sure to close cabinets and drawers when you open.</li> <li>• Kudos: To all phlebotomists for achieving zero misdirected specimens thru July! Keep up the good work! Congratulations!! To all CLSs for actively performing all annual competencies to make the deadline.</li> <li>• Theda for organizing/leading our instant recess.</li> <li>• Managers, thank you for involving UBT reps in the meeting.</li> </ul>	Informational
MVMC Important Schedules	<p>A. Air handler Shutdown  <b>Sept 22, 2018 from 2100-0700 am.</b></p> <ul style="list-style-type: none"> <li>• 2230-2330- AC and elevator will be down</li> <li>• 230-330- AC and elevator will be down</li> </ul> <p>B. Network outage to fix bugs.            There will be intermittent 30 min outage per</p> <p style="padding-left: 40px;">switch. There are a total of 36 switches</p> <p><b>Sept 27 = 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> floor</b>  <b>Oct 4 = 1<sup>st</sup> floor (including Lab)</b>  <b>Oct 11 = lower level</b></p> <p>C. September 16, 2018 12:30am to 4:30am RMS will be completely down and Cerner printing will be down. Orders that have been dispatched in Cerner can be printed via KPPI/Medicopia during downtime.</p> <ul style="list-style-type: none"> <li>• Disaster drill on Tuesday, September 18, 2018 @ 1630</li> </ul>	ALL STAFF

	<ul style="list-style-type: none"> <li>• People Pulse started on 9/10 through 9/28. Let your voices be heard!</li> </ul>	
	<ul style="list-style-type: none"> <li>• Annual competencies due by October 1, 2018.</li> <li>• Chemistry reagent inventory- AM shift-make sure to check reagent inventory for DXC600 and Access2 at least 1 hour before the end of the shift. We don't want to run out reagent at the beginning or middle of the night shift like the same thing as we don't want to run out in the beginning or middle of the day shift. Load reagents as needed and run QC on these newly load reagents and if necessary perform lot # study on new lots. Use common sense if you need to load reagent, for instance tests like BUN, Crea, etc. require more reagents than TDMS, etc. For Troponin, night shift will load only 1 additional cartridge where they will run QC on this. When day shift check inventory 1 hour before the end of their shift, load another cartridge if needed and run QC on this. Night shift check this before running QCs after midnight or even at the beginning of their shift. Make sure to load enough reagents as well for high volume tests like BUN, Crea, etc. No change on this work flow. Reagent check is everyone's responsibility. Be sure to give your co worker a heads up if you were not able to perform this.</li> <li>• Chemistry QC is changing from Biorad Liquid Unassayed Multiquel (green) to Liquichek Unassayed Chemistry control (blue). P&amp;P will change; one of the important change is opened stability- from 7 days to 6 days.</li> <li>• Please follow attachment below when handling Biorad QC materials. P&amp;P will be updated.</li> </ul>	CLS
Specimen processing for prostatic health index	As you all know, the regional lab went live with the implementation of the Prostatic Health Index (PHI) on August 28, 2018 which is for SCMPG Urologists to order. Since the requirement is a frozen sample, the serum should be separated, aliquoted and frozen. Do not freeze the vacutainer tubes. Please see LabNet instructions and remind your staff. Thank you for your attention.	Phlebotomist
UBT	Raquel discusses the survey responses, and Melanie the Health and safety projects.	

This concludes the Minutes of the 9/13/2018 Lab Staff Meeting.

Prepared by: Patricia Chea/Marissa Calilung/Marie Rutledge

Date: 9/14/2018

**Processing frozen Biorad QC materials:**

**Bio-Rad Liquichek Unassayed Chemistry Control should be treated the same as patient specimens and run as a patient samples.**

**To thaw the product, allow to stand at room temperature (18°C to 25°C) until completely thawed out no longer than 1 hour.**

**Thawed/Opened: Before each use, gently swirl the contents until homogenous with no visible signs of precipitate. For optimal stability of the product in the Thawed/Opened stability claim duration, minimize the time at room temperature to no more than 20 minutes daily. Promptly replace the stopper and return the product to 2°C to 8°C. Promptly replace stopper and return to 2-8°C after each use.**

# Technical Bulletin

## Laboratory Care Delivery System

### CHANGE TO UNIVERSAL VIRAL TRANSPORT MEDIUM FOR INFLUENZA AND RSV SPECIMEN COLLECTION

Effective Monday, **September 10, 2018**, Medical Centers will switch from the 3 mL BD Universal Viral Transport (UVT) medium to the 1 mL BD UVT medium (Fisher catalog # is BD B220526) for the following tests:

- 1) IMMUNOCOMPROMISED RESPIRATORY PANEL [15 VIRUSES, 2 BACTERIA], MULTIPLEX PCR [HC CODE: 252430]
- 2) RESPIRATORY PATHOGEN PANEL [15 VIRUSES, 2 BACTERIA], MULTIPLEX PCR, INPATIENT [HC CODE: 252429]
- 3) INFLUENZA A AND B ANTIGENS, IMMUNOASSAY WITH VISUAL READ [HC CODE: 252266]
- 4) INFLUENZA A, INFLUENZA B, AND RSV, MULTIPLEX PCR [HC CODE: 87631C]
- 5) RESPIRATORY SYNCYTIAL VIRUS (RSV) ANTIGEN SCREEN [HC CODE: 87807A]

This change will serve to minimize dilutional effects of the transport medium and is based on manufacturer recommendations.

### QUESTIONS?

- Client Service Center, 1-888-4LAB NFO, or tie line 8-397-7077
- Jonathan C. Gullett, MD; Physician Director of Microbiology, [jonathan.c.gullett@kp.org](mailto:jonathan.c.gullett@kp.org)
- Ken Van Horn, PhD, D(ABMM); Technical Director of Microbiology, [ken.van-horn@kp.org](mailto:ken.van-horn@kp.org)

Group Tools  
 File Message Group Tell me what you want to do

Ignore Delete Archive Reply Reply Forward Meeting  
 All More

Chemistry Work... To Manager  
 Team Email Done  
 Reply & Delete Create New

Rules  
 Move Actions

Assign Mark Categorize Follow  
 Policy Unread Up

Find  
 Related Select

Zoom Report  
 Spam

Thu 9/6/2018 4:05 PM  
 DV Denise V Topliff  
 FW: Specimen Processing Reminder for Prostatic Health Index (PHI) assay  
 To: RVS\_LabManagers; Kompan X. Halman; Marie T. Rutledge; Marsisa G Callung; Patricia Chea; Kristin X. VorBergen

Action Items + Get more add-ins

From: Vincent L Dizon  
 Sent: Thursday, September 06, 2018 9:48 AM  
 To: SCAL LabOpsDirectors-WPSC <SCALLabOpsDirectors@domino.kp.org>  
 Cc: Darryl E. Palmer-toy <Darryl.E.Palmer-Toy@kp.org>  
 Subject: Specimen Processing Reminder for Prostatic Health Index (PHI) assay

Good morning to all:

As you all know, the regional lab went live with the implementation of the Prostatic Health Index (PHI) on August 28, 2018 which is for SCMPG Urologists to order. Since the requirement is a frozen sample, the serum should be separated, aliquoted and frozen. Do not freeze the vacutainer tubes. Please see LabNet instructions and remind your staff. Thank you for your attention.

<http://knet.kp.org:81/california/scmpg/labnet/testmenu/testmenu.jsp?TID=11121>

Pre-Analytical Handling and Transport	
Processing Instructions:	Centrifuge, aliquot and freeze within 3 hours of blood draw
Transport:	Frozen
Temperature:	
Specimen Stability Ambient:	NO
Specimen Stability Refrigerated:	24 hours at 2° to 8°C
Specimen Stability Frozen:	5 months at -20°C or colder

If you have any questions, please let me know.

Thank You,

Vincent L. Dizon, MBA  
 MT(ASCP)JLIM SBB  
 Director of Laboratory Operations  
 Chemistry Services  
 SCMPG Regional Reference Laboratories  
 11668 Sherman Way, North Hollywood, Ca 91605  
 Phone: (818) 503 - 7050  
 Fax: (818) 503 - 7008

Windows taskbar showing icons for Internet Explorer, Outlook, and other applications. System clock shows 8:56 AM.

## EFFECTIVE 09/19/2018

### KPHC Specimen Source List Order Update

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**Announcement:** The specimen source lists in KPHC will be updated for two (2) orders that are sent out to Quest Diagnostics.

**Changes:** Below is the list of KPHC Orders impacted.

Order Name	Updated Source List	Sources Removed
HERPES SIMPLEX VIRUS 1 AND 2 DNA, QUALITATIVE, PCR [249463]  Quest Test Code: 34257	AMNIOTIC FLUID  BLOOD  PERICARDIAL FLUID  PLEURAL FLUID  VAGINA  VITREOUS FLUID  BRONCHOALVEOLAR LAVAGE (BAL)	FLUID  TISSUE  URINE
VARICELLA ZOSTER VIRUS, PCR [87798E]  Quest Test Code: 34052X	BLOOD  CSF  BRONCH LAVAGE  BRONCH WASH  EYE  LESION  ASPIRATE  NASAL SWAB  NASOPHARYNX  THROAT SWAB	

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**Distributed by:** Laboratory Informatics Department  
11668 Sherman Way, North Hollywood, CA 91605  
Phone: (818) 503-6894 or Tie Line: 8-397-6894

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**Issue Date:** September 10, 2018

## REMEMBER WHEN IT COMES TO A SAFE AND SECURE ENVIRONMENT...



### If you SEE SOMETHING, SAY SOMETHING!

- **Exercise caution.**
- **Use good judgment.**
- Should you find items that appear to have been stolen, DO NOT touch or move them. Call Security.
- When you see something suspicious that needs to be reported, stay safe and do not confront the situation.
- Contact Security at **(951)353-4545**
- If danger seems imminent, always call 911.



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# Laboratory Care Delivery System

## LABrounds

Diagnostic updates from your SCPMG laboratory and pathology partners

August Issue – 2018

### Welcome to LabRounds!



Did you know we have a lab devoted to one of the most sophisticated and specialized diagnostic tools available for blood disease? The SCPMG Flow Cytometry Laboratory offers tests for neoplastic hematology (lymphoma and leukemia), lymphocyte subsets, PNH, and DNA ploidy.

Flow cytometry is a specialized test and its interpretation requires incorporation of all other pathology findings. In recent years, the flow lab has performed over 10,000 tests for neoplastic hematology. Flow cytometry with 10 color antibodies will be available in the coming months.

Laboratory tests and the care of hematology patients have become more complicated in recent years. Hematopathologists can help coordinate patient care between clinicians and other laboratory services. To improve quality, efficiency, turnaround time, and correct interpretation of tests, we encourage early communication with hematopathologists. We can support triage and transport of specimens, test selection and interpretation, and help reduce unnecessary test requests.

Currently, we have 5 hematopathologists at LAMC and 2 at Orange County. We are happy to be a part of the Kaiser Permanente teams that provide quality care for our patients.

Tse-Chang Cheng, MD, PhD  
Medical Director, SCPMG Flow Cytometry Laboratory  
Los Angeles Medical Center

### LAB NEWS & UPDATES

#### Primary Care / General Interest \*ARCHIVES\*

- Hepatitis B and C reflex orders replace single orders in SmartGroup panels
- Hematology tests on routine (non-stat) orders performed for some medical centers at Chino Hills Regional Reference Lab
- Prostate Health Index available as test order
- Reticulocyte hemoglobin content provided for some reticulocyte orders
- Urinalysis with 3 new optional result components

#### Specialty Changes \*ARCHIVES\*

- BCR-ABL1 testing follows reflex protocol for major and minor breakpoints
- Cyclosporine rebaselining for transplant pts
- Activated protein C resistance reference range update
- Aeromonas and Plesiomonas stool culture orders available

#### System Changes - test codes, instrument, container \*ARCHIVES\*

- Allergy IgE temperature shipment requirement
- Allergy IgE add-on process

### IMPROVE YOUR DX PRACTICE

#### Laboratory test cancellations

Laboratory test cancellations are an everyday reality for many clinicians, but they can decrease with process improvements. The KPSC Laboratory Care Delivery System has cancelled 1.4 million lab orders through June of this year.

70 percent of these tests were automatically cancelled from system-generated algorithms that check for duplicate test orders, correct HPV protocol, no specimen received, and orders that were not collected before a patient was discharged from the hospital or ED. The top reason for non-automated cancellations was due to hemolysis; however, almost all of these cases lead to a patient recollection and the test will be completed on either the original order or a new one.

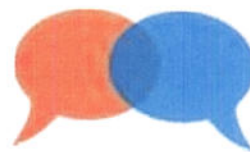
We continue to strive to decrease the number of cancellations by using tools and techniques found in Continued Process Improvement (CPI) and current laboratory community standard practices.

Fred Ung, CLS  
Director of Laboratory Quality and Compliance  
SCPMG Laboratory Care Delivery System

### JOIN THE DISCUSSION

#### Outside lab orders & results

Join our online [discussion board](#) to share suggestions, questions, and concerns about outside lab orders and results.



#### Questions?

KPSC Regional Reference Labs  
Client Services Center 24-7 – 1-888-4LAB-NFO

#### Connect!

Get to know your SCPMG lab & path team  
KPSC Lab & Path SharePoint Site  
KPSC LabNet Test Menu  
Find a lab near you

[Your feedback](#) regarding this newsletter would be much appreciated!

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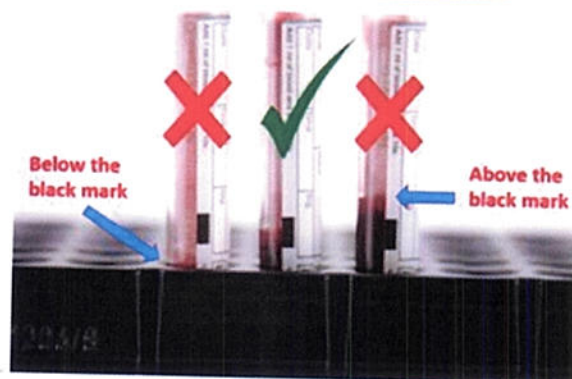
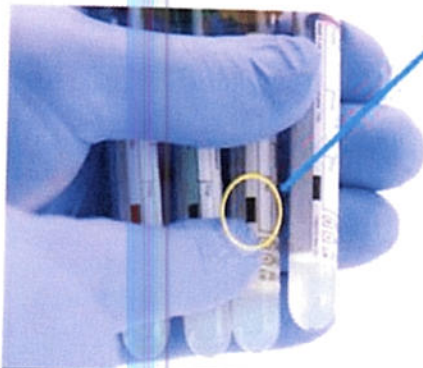
# Technical Bulletin

## Laboratory Care Delivery System

### QUANTIFERON-PLUS TUBE COLLECTION IMPORTANT REMINDERS

- **The draw level should be at or within the black volume indicator mark on the tube:**
  - The black mark indicates the validated range of collected sample - between 0.8 and 1.2 mL.
  - If the level of whole blood in any tube is outside of the black mark, a new blood sample should be obtained; under- or over-filled tubes may lead to erroneous results.
  - A tube in which blood is at but does not exceed the black mark is still acceptable for testing.
- **Ensure adequate time for the blood tube to fill:**
  - As 1 mL tubes draw relatively slowly, keep the tube on the needle for 2-3 seconds after the tube appears to have completed filling. This practice will help ensure that the correct volume is drawn.
  - Do not take the tourniquet off too early as this may stop the blood flow into the tube.
- **Evaluate tubes for fill volume:**
  - Redraw an under- or over-filled tube prior to the removal of the tourniquet.
  - An extra package of tubes should be open and accessible to redraw a like-colored replacement tube.
- **Do not cover the black mark on the tube:**
  - When labeling the tube, do not cover the black indicator mark so that the blood level can be assessed without peeling off the label in the laboratory.
- **Alternative collection methods:**
  - Drawing an extra lithium heparin tube for use in filling short draws is **off label and unacceptable**.
  - Filling tubes directly from a butterfly is acceptable on a case-by-case basis. A “purge” tube should be used to ensure the tubing is filled with blood prior to the QFT blood collection.

- ✓ The black mark on the side of the tubes indicates the range of 0.8 to 1.2mL fill volume.
- ✓ Sample in all 4 tubes should be **AT OR WITHIN** the black mark.



## QUESTIONS?

- Faranak Tahmasbi, Manager Immunology Department, 818-503-6819, tie line 397
- Nimfa Burgos, Assistant Director of Laboratory Services, Immunology Department, 818-503-6887, tie line 397
- Vahe Khanlian, Director of Laboratory services, Microbiology, 818-503-6646, tie line 397
- Client Service Center, 1-888-4LABNFO, or tie line 8-397-7077
- Arnold Gacusan, Laboratory Outreach Manager, 818-503-6604, tie line 397