


LAB Dept MEETING – Huddles

Date of Meeting: 5/23/2019

Attendees: Jocelyn Ybarra, Alan Dandridge, Juliet Garlejo, Lourdes Maniago, Alejandro Tolentino, Gregory Johnson, Michelle Trammell, Mark Gomez, Elliott Faure, Melanie Magee, Patricia Chea, Marissa Calilung, Theda Bryant

Topic	Details	Action Item, responsible person, date due, or informational only
KUDOS	<p style="text-align: center;">Happy Memorial Day </p> <ul style="list-style-type: none"> • Congratulations Juanita time in service 3 Years as of May 9, 2019. • Thank you to all the CLS for starting and continuing to double spin and freeze Coag samples needed for the new Stago you all are awesome!!! • Congratulations to 2018 Perfect and Outstanding Attendance awardees. Thank you for always coming to work for our patients and your co-workers! • 2018 Perfect Attendance: Jocelyn Ybarra Lourdes Maniago Myrna Ocab Neil Lim Quang Trinh • 2018 Outstanding Attendance: Juliet Garlejo Elliott Faure Vanessa Cardenas Letty Fajardo Alan Dandridge Tessa Strickland • Thank you to Mayra and Marietes for cleaning and organizing the supplies in restroom and breakroom. • To Juliet from Mark for helping him in start the processing of tests: FOBT, Sed rate, etc • To all night shift CLS; Quang, AJ, Alan, Neil for helping with staffing shortage- from Jocelyn, Juliet, and Lourdes 	Informational

Safety Tip	<ul style="list-style-type: none"> • Safety conversation question for May: What is working well in your department or Medical Center around safety? <ol style="list-style-type: none"> 1. The lab huddles. Tells us what is safe and not safe. 2. When Co-workers use “Safety Check Please” • Be careful with the chairs in UA. It rolls back. Hold the arm rest down before sitting. • Do not stack buckets and totes too high 	
Staffing and Scheduling	<ul style="list-style-type: none"> • Thank you all for working OT to make sure that we have enough support on all shifts. It is greatly appreciated by management and your coworkers. • Welcome two new employees <ol style="list-style-type: none"> 1. Mariela Mora- Limited Part time phlebotomist for night shift 2. Jacob Morgan- Part time CLS for night shift 	ALL STAFF
Phishing	<p>Meaning: fraudulent practice of sending emails to gather information.</p> <p>Be on alert. Do not open non KP emails or suspicious emails.</p>	ALL STAFF
SAFETY TIP 2019 Lab Goals People Pulse Question: Do you know your goals?	<p>CLS</p> <ul style="list-style-type: none"> • ED in-lab to verify TAT- CBC (15 mins), Elec (20 mins), Trop (35 mins), Lact (40 mins)- 10/12 months • CLS competency completion before Oct 1, 2019-100% • CLS to print and review pending- 95% compliance <ul style="list-style-type: none"> <input type="checkbox"/> A shift: 1700 <input type="checkbox"/> B shift: 0500 <p>Phleb</p> <ul style="list-style-type: none"> • Blood culture sent on the first available courier- 95% (now combined with IP/ED samples) • IP/ED samples sent on the first available courier- 75% 	ALL STAFF

	<ul style="list-style-type: none"> • IP Non AM draws (from order to draw, except 0515 am)- + 1.5 hours 95% • IP Timing critical (order to draw)- + 15 mins- 50% <p>Managers will post monthly updates on the UBT board</p> <p>Our goals need teamwork:</p> <p>Phlebs to deliver ED and STAT specimens to specific department right away including BB tubes, esp the four tests CBC, Lytes, Trop, and Lactic Acid.</p> <ul style="list-style-type: none"> • Don't batch ED specimens. Take at the testing area as they come. • Take the CBC back to CLS as soon as it's logged in. Do not wait for the Chem specimens being centrifuged. <p>CLS to cancel tests as requested by Phlebs right away. ALL STAFF</p>	
<p>Out QC</p> <p>Pending Log Printing</p> <p>OB samples</p>	<ul style="list-style-type: none"> • Remember when starting your shift to check the previous shifts QC if out then you need run QC to correct the issue prior to running patients. We are a team not A shift and B shift, so if you see something the other shift missed don't let it go and think you do not have to take action. Additionally, let your manager know because we may have to repeat samples. This is time sensitive due to sample stability and making sure we did not verify a result on QC that was not in. • You have a goal of printing all departments at the end of your shift, and to verify everything was resolved or has an explanation. Please make sure that all the departments are printed for each shift these are being checked weekly for compliance. Immunology has been missed on many of the days, so if there is no pending please write on your printout that there is no pending. About 100% of the time Immunology is not printed or indicated as (<i>no pending</i>) • When you receive an OB sample this is not done here at MVMC. It needs to be sent out to Sherman Way and if the antibody screen is positive then they will perform the titer. There was a complaint because an OB sample was not tittered for the antibody that we performed here at MVMC please be careful when reviewing the patients blood bank history and current orders. 	<p>CLS</p> <p>CLS</p>

Desk Sanitation Log	<ul style="list-style-type: none"> • Desk Sanitation using PDI wipes to be performed and logged before the start of the shift. There are 3 boxes for each shift CLS to sign. B shift also has 3 boxes if there are only 2 of you will one of you please put N/A in the other box, so it doesn't look like someone missed the sanitation. 	
<p>ABO Discrepancy</p> <p>New Stago Compact max</p>	<ul style="list-style-type: none"> • ABO discrepancy-when sent out to life stream for workup we cannot use these results in Cerner. You must enter the exact reactions that you tested. Furthermore, before sending out to Life Stream use the pre-warm technique many times this resolves the discrepancy and the need to send out for testing. If you run into trouble and are not sure what to do REMEMBER to escalate the matter to Marie and/or Dr. Taira. • The new Stago Max has arrived and is located in SDU. Training for Jocelyn and Marie will be the week of June 3rd, and validation will start June 10th. Please make sure that you are saving samples needed for the validation. It is very important we have all the samples before the validation starts. 	CLS
Body Fluids	<ul style="list-style-type: none"> • Please continue to save Pleural, Peritoneal and Synovial body fluids. Aliquot in 2 tubes (1 mL min), put type of fluid on label then store in chemistry freezer (blue rack labeled pleural/peritoneal) 	CLS
Add on test workflow	<ul style="list-style-type: none"> • Reminder: Please follow our lab work flow when adding on tests: <ul style="list-style-type: none"> ➢ Retrieve specimen ➢ Ask CLS first if acceptable before logging in ➢ Stick Cerner accession label on top of tube and write "add on" on label 	Phlebotomist
Reminder for Body Fluid Processing with Cytology orders	<ul style="list-style-type: none"> • See attached workflow below: Big bottles vs small sterile cups 	Phlebotomist
UBT	<ul style="list-style-type: none"> • Working on three projects- Survey sent due May 1, 2019 ✓ Hand hygiene <ol style="list-style-type: none"> 1. To clean/sanitize work area before the start of your shift. <ul style="list-style-type: none"> Phleb to use communication log CLS to use form in communication log ✓ Adopt or spread project ✓ People Pulse Action Plan 	ALL STAFF

	<p>1. Pick your vote on the UBT board. We want to hear from you before the next June 18 UBT meeting</p> <p>People Pulse Question: are you part of the Lab UBT?</p> <ul style="list-style-type: none"> • Yes, we all are 	
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This concludes the Minutes of the _5/23/2019_____ Lab Staff Meeting.





Prepared by: Marie Rutledge, Patricia Chea, Marissa Calilung Date: _5/29/2019__


People Pulse Page

Lab UBT Level 5

“Teamwork makes the Dreamwork”

 Accomplished
  Pending
  Future
  No Go

Date	What's Happening	Stoplight Report	For Follow UP
9/10 to 9/28	2018 People Pulse		
	50% People Pulse response rate as off 9/18/18. Goal is min 75%		
	73% People Pulse response rate as off 9/25/18. Goal is min 75%		
1/2019	Presented to Lab UBT		
3/2019	Managers to discuss result to employees		Available on UBT board if you want to see the result
4/2019	UBT to work on action plan (3) I would feel comfortable raising an ethical concern or compliance-related issue to my immediate supervisor or someone else in management		Survey sent by Theda on 4/26 due May 1, 2019 No response received. Second email sent 5/7/19 due May 14, 2019 Received 2 responses from the survey

5/2019	UBT members are asked to vote which activity they prefer based on the 6 ideas from UBT reps brainstorming		Due before next UBT meeting on June 18
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Desk Sanitation 2019.pdf - Adobe Acrobat Reader DC

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Share

Please clean and log before the start of shift.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
May	A:500	B:1700	A:500	B:1700	A:500	B:1700	A:500	B:1700	A:500	B:1700	A:500	B:1700	A:500	B:1700	A:500	B:1700
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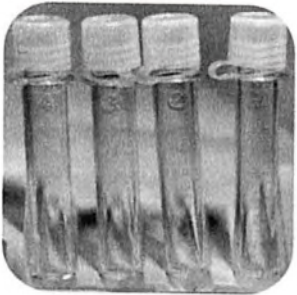
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Processing Instructions for Cytology Specimens



Received in large container bottles

1. No need to fix the specimen. Send the whole container.
2. Storage: Refrigerated
3. Send to RMC Monday thru Friday (Do not send on Holidays or weekends)
4. If specimen is received on Friday after the 1230 pm courier, then refrigerate the specimen and send early Monday.



Received in small containers

1. Fix specimen using 1:1 50% Reagent Alcohol.
2. Use the sterile container for fixing, attach the hazard label with the expiration date of the alcohol used.
3. Label with patient information
4. Send to RMC Sunday night thru Friday.

Reminders before sending

