





LAB Dept MEETING – Huddles

Date of Meeting: October 20, 2020

Attendees: Myrna Ocab, Juliet Garlejo, Priscila Dar, Quang Trinh, Dennis Burguillos, Marla Mallari, Nancy Khalil, Letty Fajardo, Mark Gomez, Juanita Fernandez, Erica Torres, Sandy Burciaga, Christina Burns, Gladys Reyes, Patricia Chea, Marissa Calilung, Theda Bryant

Topic	Details	Action Item, responsible person, date due, or informational only
KUDOS	<p>Thank you to Myrna for covering and helping SPA Thank you to Erica for helping every weekend Thank you to Gladys for helping with our staffing Thank you to Theda for organizing the Lakers potluck and providing prizes Thank you to Priscila for helping look for the pending chemistry specimens Raquel, Juliet, and Lourdes helping SPA when we are on lunch</p> <p>Thank you to those who completed their People Pulse. If you get an invite, please respond. They are anonymous and confidential.</p>	Informational
SAFETY 	<ul style="list-style-type: none"> • Due to the Statewide Drill being cancelled because of the pandemic, each department is required to complete and validate the Annual Safety / Disaster Training review for all staff. We'll be doing this in the next few weeks, completing the Annual review checklist - work practices, Department resources and Department tour. • Annual Environment Health & Safety and Chemical Hygiene Training is also coming up. This includes a KP Learn course training and a quiz. • BLUE BINS locations on the floor <ul style="list-style-type: none"> ✓ Regular rooms- one in room ✓ Isolation rooms- one in room and one outside • EOC rounds- lab got cited. There was a red biohazard bin that was under the shower. There should not be any obstruction to get to the shower. Please don't put the red bin or anything that can obstruct the shower. 	
Manual Time Log	<ul style="list-style-type: none"> • Need to reduce use of manual time log • Some suggestion <ul style="list-style-type: none"> ✓ Let the automated voice finish ✓ Use speaker ✓ Use # 	

	<ul style="list-style-type: none"> ✓ Listen before walking away 	
24 hour Urine	CLS to check ORV to identify what are the orders	
ARUP	Send transfer list that has Patient Name and MR number to ARUP. They cancel orders if paperwork does not have two patient identifiers	
Medicopia	<ul style="list-style-type: none"> • From Bruce Golovkin <ul style="list-style-type: none"> ✓ Drawing extra tube is non compliant. Only ED is allowed to do pre-emptive draws ✓ Pushing orders early is not a regional workflow. 	
STAT centrifuge	<ul style="list-style-type: none"> • Reminder to use the STAT Spin centrifuge for all ED chemistries and the Lactic acid centrifuge for all lactic acid tests. DO NOT use the 15- minute big centrifuge for ED STATs. 	ALL STAFF
STAT TAT	<ul style="list-style-type: none"> • We're still not meeting our STAT turn around time for ED CBC. The regional goal is 20 minutes from in lab to verify. We need to keep on working on this. <ul style="list-style-type: none"> ➢ Phlebotomists- bring all ED CBC's to testing area as soon as logged in. Do not wait for the Chemistry in the centrifuge. Announce the STAT CBCs. DO NOT batch CBC's, always bring to CLS as soon as logged in. Do not wait to log in the specimens that just got in before taking all at the back. ➢ CLSs- analyze promptly as soon as receive in the back. Release the Hgm part right away. Do not wait for the manual diff or smear review if there is. You can check the parameters that can be released and leave the ones that needs to be reviewed like the platelet count, etc. • Some suggestions: <ul style="list-style-type: none"> ➢ Phleb to log in using Specimen Log In instead of ORV ➢ CLS to log in ED specimens (CBCs only? but have the same acc # as some Chem and Coag) • Data being shared regularly especially individual CLSs' data to have a visual on how we're doing. • Some feedback from CLSs: <ul style="list-style-type: none"> ➢ Not all stat CBC's are announced. Phlebotomists please always announce stat CBCs especially when there's nobody in Hematology area. ➢ Some wait for the Chemistry in the centrifuge before bringing CBCs in the back. Phlebotomists please bring CBCs in the back as soon as logged in. Do not batch or wait for the Chemistry in the centrifuge. 	ALL STAFF

	<ul style="list-style-type: none"> • Helpful tips for the CLSs: <ul style="list-style-type: none"> ➤ Keep your TAT monitor on ➤ Check your pending regularly ➤ Vortex CBC specimens for 1-2 seconds before loading in analyzer. This is to help in eliminating “R” flags. <p>Thank you for your teamwork and continuing support to improve our ED CBC TAT. Let me know if you have any more suggestions to improve this important aspect of patient care.</p>	
CLS annual competency	<ul style="list-style-type: none"> • Thank you for submitting your annual competencies. In process of being reviewed and graded. • Reminder to complete all assigned quizzes on Med Training. This is part of your annual competency. 	CLS
Urinalysis	<ul style="list-style-type: none"> • Heads up! UA area will be transferred to Immuno area to give way to additional bio hood. More on this to follow 	ALL STAFF
UBT	<p>Do you have a good idea to improve workflow? Volunteer to be a UBT representative Reach out to Mitch or Suzanne</p> <div style="background-color: #f0f0f0; padding: 10px; border-radius: 5px;"> <div style="display: flex; align-items: center; margin-bottom: 10px;">  <div style="margin-left: 10px;"> <p>Mitchell L. Marsile 8:41 PM</p> <p>MMarsile@seiu-uhw.org</p> <p>(626)644-2819</p> </div> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;">  <div style="margin-left: 10px;"> <p>Suzanne M Bulf 8:41 PM</p> <p>Susie Bulf 949-929-3017 cell</p> </div> </div> <div style="display: flex; align-items: center;">  <div style="margin-left: 10px;"> <p>Meeting ended 18m 48s 8:46 PM</p> </div> </div> </div>	



Ambulatory KEY MESSAGES

Effective: September 25, 2020

Clinical Users

New Panel Order for Asymptomatic COVID-19 Testing

Based on recommendation from the SCAL COVID-19 Regional Command Center, we created a new order panel in support of COVID-19 testing expansion to asymptomatic patients.

The **ASYMPTOMATIC COVID-19 SCREENING PANEL** is under the **Panels** section during order search.

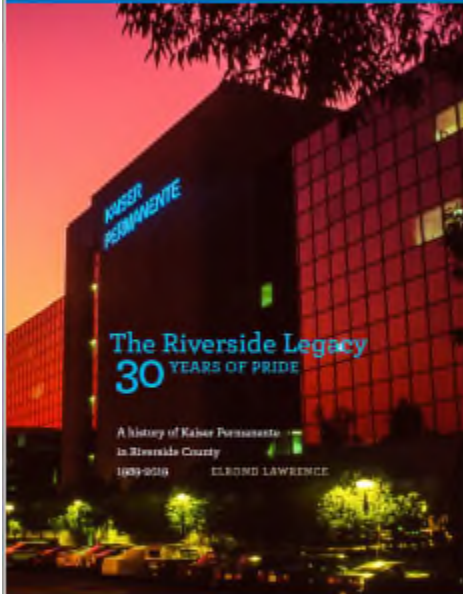
Open the attached PDF to review the entire Key Message.



COVID Asx PNL -
SCAL - EffSep2...

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commemorative book now for sale!*



Kaiser Permanente ONE Riverside is excited and proud to offer for sale our new book: **The Riverside Legacy: 30 Years of Pride**. This beautiful book tells the history of the Kaiser Permanente Riverside Service Area with lively stories and hundreds of photos starting with the early days planning Riverside Medical Center's construction continuing documenting 30 years of expansion across Riverside County.

**Get your copy for \$25 at the
volunteer services gift shop.**

For more information, contact Luz Soto, Volunteer/Events Supervisor at 951-353-5759 or Luz.M.Soto@kp.org



Technical Bulletin

Laboratory Care Delivery System

STREPTOCOCCUS PNEUMONIAE IGG (23 SEROTYPES) AT ARUP

Effective Wednesday, October 21, 2020, *Streptococcus pneumoniae* IgG (23 serotypes) [245245] will be available for send out to ARUP Laboratories. The order for this test will require a choice to be made as to whether the specimen is pre or post immunization or random. ARUP will hold pre-immunization specimens until a post-immunization specimen is received and then perform both at the same time. This test replaces the current test, *Streptococcus pneumoniae* IgG (14 serotypes) [226056], performed at Quest Diagnostics (which will be inactivated).

The intent of this change is to provide the ability to evaluate the antibody response to the 23 valent pneumococcal polysaccharide vaccine as well as the 13 valent pneumococcal conjugate vaccine for the evaluation of humoral immunodeficiency.

There will be a new process that will take place when obtaining the sample from the patient. The ordering physician must choose in the Health Connect order whether the patient sample is being drawn

- Prior to the vaccination (PRE)
- After the vaccination (POST)
- Randomly such as if the physician wants to know the immune status on a previously vaccinated patient (RDM)

Once the barcode label is generated, the laboratory personnel must circle either "PRE", "POST" or "RDM" on the accession label before sending the sample to ARUP.

It is imperative that the samples are correctly labelled so the laboratory will test the samples appropriately.

- Any samples labelled "PRE" will be held at ARUP until the "POST" sample is received and then tested together
- "RDM" samples will be tested as soon as the sample is received

TEST INFORMATION

Test Location	ARUP TC# 2005779
KPHC Order Display Name [Code]	STREPTOCOCCUS PNEUMONIAE IGG (23 SEROTYPES), QUANTITATIVE, MULTIPLEX IMMUNOASSAY [245245]
KRMS Procedure Name [Code]	5 PNEUMO IGG (23 SEROTYPES) [8631703]
CPT Code(s)	86317 x23
Specimen Requirements	Blood in GLD6
Collection Label Test Mnemonic	5 pneumo23

Survey Readiness

Informational Newsletter for Riverside Medical Center and Moreno Valley Medical Center

October 16, 2020



TJC Mook Surveys by Regional Leaders:
MVMC – Dec. 14-15, 2020
RMC – Jan. 6-8, 2021
RMC Home Care – Dec. 14-15, 2020



TJC Survey Readiness Manual, Pls. click the link:

[RSA: A Guide To "Survey Success" 2020-2021](#)

Reviews of some of the Joint Commission Standards (may use for huddles)

APR.09.01.01 The hospital notifies the public it serves about how to contact its hospital management and The Joint Commission to report concerns about patient safety and quality of care. **Note:** Methods of notice may include, but are not limited to, distribution of information about The Joint Commission, including contact information in published materials such as brochures and/or posting this information on the hospital's website.

The public, including staff and providers are informed that any patient safety and quality of care concerns may be reported to the Joint Commission with no fear of retaliation. For patients, this notification is included in the "While You are Here" booklets provided to patients at time of admission. This notification is also posted in some prominent areas.

LS.02.01.20 The hospital maintains the integrity of the means of egress.



Means of egress include corridors, stairways and doors that must be free from obstructions that allow individuals to leave a building or to move between spaces in a building especially at time of emergencies.

MM.06.01.01 The hospital safely administers medications.



Before administration, the individual administering the medication does the following:

- Verifies that the medication selected matches the medication order and product label
- Visually inspects the medication for particulates, discoloration and other loss of integrity
- Verifies that the medication has not expired
- Verifies that no contraindications exist.
- Verifies that the medication is being administered at the proper time, in the prescribed dose, and by correct route.
- Discusses any unresolved concerns about the medication with the physician and /or staff involved with the patient's care, treatment and services.



LD.04.03.09 Care, treatment, and service provided through contractual agreement are provided safely and effectively.

Leaders (Governing Body) monitor contracted services by establishing expectations for the performance of the contracted services and evaluating these services in relation to the hospital's expectations. Steps are taken to improve services that do not meet expectations.

PC.01.03.01 The hospital plans the patient's care.

The plans for the patient's care, treatment, and services are based on needs identified by the patient's assessment, reassessment and results of diagnostic testing. The plans and goals are revised based on patient's needs.

HR.01.07.01 The hospital evaluates staff performance.



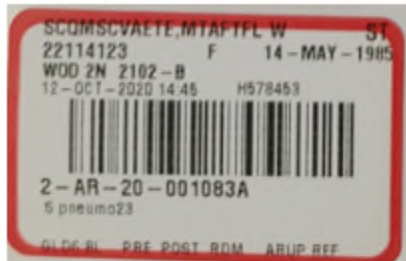
The managers evaluate staff based on performance expectations that reflect their job responsibilities. The frequency of the performance evaluation is based on hospital policy. (RSA – Annually)

LSM/ARBL 10-16-20

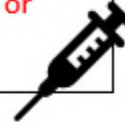
Preanalytical Workflow for STREPTOCOCCUS PNEUMONIAE IGG (23 SEROTYPES)-ARUP Send out

This NEW order will be Effective Wednesday, October 21, 2020.

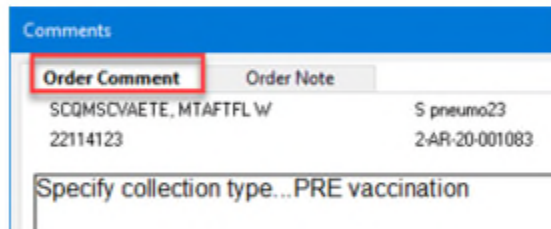
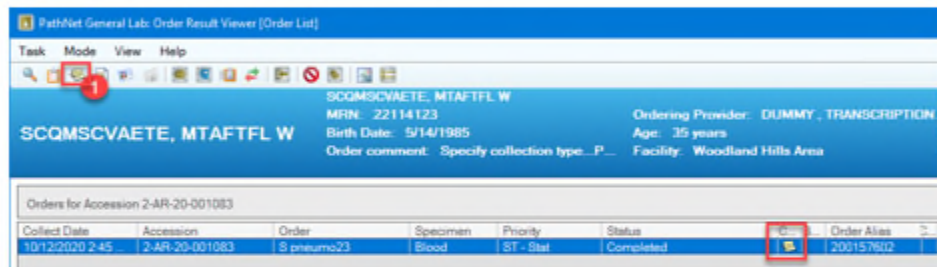
Collection label will have new special handling of "PRE POST RDM"



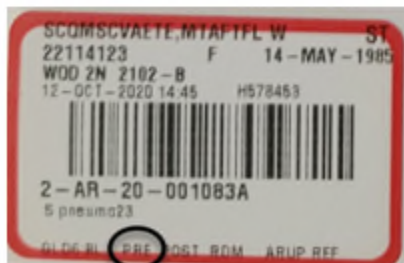
Processing staff will need to view order comments in Cerner to determine if the order for this test is pre or post immunization or random.



Open order by accession number and click on icon (1) to view details.



After viewing order comment circle appropriate choice on label and send refrigerated serum to ARUP



NOTE: ANY SAMPLES LABELLED "PRE" WILL BE HELD AT ARUP UNTIL THE "POST" SAMPLE IS RECEIVED AND THEN TESTED TOGETHER "RDM" SAMPLES WILL BE TESTED AS SOON AS THE SAMPLE IS RECEIVED

10/15/2020

This concludes the Minutes of the _October 20, 2020 Lab Staff Meeting.

Prepared by: Patricia Chea, Marissa Calilung_

Date: 10/22/2020_