

Beaumont

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Pediatric Bone Marrow Workflow - RO

Document Type: Guideline

I. PURPOSE AND OBJECTIVE:

- A. This document identifies the process for Hematology Bone Marrow Technologists when assistance with a pediatric bone marrow procedure is requested. It is expected that following this procedure will provide the proper work flow / documentation of pediatric bone marrow assistance.

II. PROCEDURE:

- A. **Pediatric Nurse Staff Responsibilities:** When it is determined that a pediatric bone marrow is necessary, the pediatric nurse staff will:
1. Document the procedure on their Procedure Schedule.
 2. Fax the above schedule to (Pharmacy) and the Hematology lab (248-551-5372).
 3. Order the appropriate bone marrow procedure in EPIC.
 4. Obtain bone marrow supplies (e.g. bone marrow needle) that will be needed for the bone marrow procedure.
- B. **Bone Marrow Technologist Responsibilities:**
1. Check the hematology fax machine each afternoon for the Pediatric Procedure Schedule. Note the name, birthdate and procedures for the schedule. If a bone marrow is scheduled, note the date and time that you will be expected to arrive at the Pediatric Intensive Care Unit (PICU) to assist with the procedure.
 - a. **NOTE:** If a fax is not received, feel free to call the PICU with the following scripted message: "We did not receive the pediatric procedure schedule for today. Please fax it to us at x15372."
 2. Proceed to the PICU at the designated time. After collection of specimen, return to the hematology lab and process the specimen. When finished processing, forward to Anatomic Pathology. If bone marrow technologist has left for the day, contact the Outreach couriers who will deliver the specimen to Anatomic Pathology.
 - a. **NOTE:** If Cytogenetics is ordered, place specimen in designated bucket in hematology lab and contact Cytogenetics for pickup. Specimens for Cytogenetics must not go through the pneumatic tube system.

C. Outreach Courier Responsibilities

1. Deliver the designated bone marrow specimens to Anatomic (Surgical) Pathology (lower level North Tower of hospital) As Soon As Possible (ASAP).

III. QUALITY CONTROL:

Bone Marrow technologists will monitor the above process and report inconsistencies to hematology management.

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
Hematology Medical Director Designee	Ann Marie Blenc: System Med Dir, Hematopath	12/14/2021
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Policy and Forms Steering Committee Approval (if needed)	Gail Juleff: Project Mgr Policy	11/23/2021
System Manager	Rebecca Bacarella: Mgr Laboratory	11/23/2021
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