

**Beaumont**

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Applicability Royal Oak

## Cancer Center Specimen Work Flow - RO

Document Type: Guideline

### I. PURPOSE AND OBJECTIVE:

- A. To provide a smooth process for targeted turnaround times when Cancer Center patient specimens must be forwarded to the STAT Lab for processing and resulting. This is performed by:
1. Cancer Center Phlebotomy Staff
  2. STAT lab Staff
  3. Processing Staff
  4. Hematology Staff
- B. It is expected that this process will ensure the targeted turnaround time (TAT) from specimen collection in the Cancer Center to resulting in the STAT lab. In-lab TAT should be within 30 minutes of receipt of specimen in STAT lab (unless further verification is necessary).

### II. MATERIALS:

- A. EDTA specimens
- B. Biohazard specimen bags
- C. Pneumatic tube carriers
- D. Foam for pneumatic tube carriers
- E. Laminated "Return Carrier and Foam to Rose Cancer Center" card

# III. PROCEDURE:

## A. Cancer Center Phlebotomist Responsibilities

1. Monitor pneumatic tube carrier -supply and foam supply for the day. Contact the Core Lab specimen processing area 248-551-3139) for supplies if needed.
2. Collect patient specimen per procedure.
3. Order CBCND (Complete Blood Count No Differential) or (CBCWD [Complete Blood Count With Differential]) for both pediatric and adult patients.
4. Order test(s) STAT.
5. Label specimen per protocol utilizing specified barcode label.
6. Place specimen in biohazard specimen bag.
7. Insert laminated "Return Carrier and Foam to Rose Cancer Center" card into pneumatic tube along with specimen and foam.
8. Send pediatric specimens to STAT lab (tube #311).
9. Send adult specimens to Core lab (tube #266).

## B. STAT Lab Specimen Processing Responsibilities

1. Receive specimen in Laboratory Information System (LIS); forward to hematology analyzer tech.
2. Return pneumatic tube carrier, foam and stained slide to Rose Cancer Center (tube #256) as requested by Cancer Center phlebotomist (laminated card sent with specimen in pneumatic carrier).
3. Any CBC or CBCWD specimens needing further verification must be tracked (using the specimen tracking activity in the laboratory information system (LIS)) to the Core lab.

## C. STAT Lab Technologist Responsibilities

1. Obtain printout of Pediatric Hematology schedule (OneChart- OneContact Appointment Center.)
2. Run CBCND/CBCWD specimens on hematology analyzer.
3. Make peripheral blood smears as needed.
4. Stain and read out peripheral blood smears as needed.
5. In addition, call all Emergency Center (EC) critical values.
6. Forward stained smears and instrument printouts to Core Lab Hematology for secondary review as needed per procedure.
7. Obtain pending log approximately every two hours, looking for Cancer Center (CC) stats and EC specimens.
8. Monitor pending logs for specimens with results that may not have crossed from the middle ware to the LIS.
9. Save stained slides daily in slide boxes kept in designated STAT lab drawer.

10. Send stained slides as requested to Cancer Center.
11. Obtain any necessary supplies from Core Lab Hematology.

#### **D. Hematology Core Lab Responsibilities**

1. Cancer Center CBCND/CBCWDs and other samples received in the Stat lab will not print on the Royal Oak Hematology pending list. However, the H2 technologist may need to help locate any missing CC and other samples originally received in Stat lab. When investigating missing CBCND/CBCWDs, if collector was CC phlebotomist, contact STAT lab for assistance with resolution.
2. All specimens received from STAT lab must be tracked as "received in Hematology" by the H2 hematology technologist.
3. After specimen is tracked as "received in Hematology", the H2 technologist will give the instrument print out and stained slide directly to a morph bench technologist.
4. The morph bench technologist will promptly review the smear.

#### **E. Core Lab Specimen Processing Responsibilities**

1. Send pneumatic tube carriers and foam to Rose Cancer Center (tube #256) daily or as requested by Cancer Center phlebotomist.
2. Avoid sending carriers or foam to Cancer Center without first calling Cancer Center phlebotomist (248-551-2458) to alert them of carriers / foam.

## **IV. QUALITY CONTROL:**

Hematology Management

## **V. NOTES:**

- A. Specimens must be sent through the pneumatic tube system per procedure (no "piggybacking" of carriers).
- B. If the STAT lab hematology instrument is down for any reason, the above process must be followed. The STAT lab processor will receive the Cancer Center specimens in the LIS and forward to the Core Lab in a RED bag along with a sticker affixed to the bag stating, "Deliver Directly to Hematology". Do NOT contact the Cancer Center phlebotomists or have them re-route specimens to the Core Lab.
- C. The STAT lab tech will take one break from noon to 1pm. During that time, a Hematology tech from Core Lab will go to Stat Lab to cover the break. In the event this coverage is unavailable, a Chemistry tech may continue to run specimens on STAT lab hematology analyzer. However, any specimens which need further verification must be promptly forwarded/ tracked to Core Lab.

## Approval Signatures

Step Description	Approver	Date
Hematology Medical Director Designee	Ann Marie Blenc: System Med Dir, Hematopath	4/8/2022
Policy and Forms Steering Committee Approval (if needed)	Michele Sedlak: Medical Technologist Lead	3/29/2022
Policy and Forms Steering Committee Approval (if needed)	Gail Juleff: Project Mgr Policy	3/8/2022
	Megan Masakowski: Mgr Laboratory	3/8/2022
	Michele Sedlak: Medical Technologist Lead	2/23/2022

## History

**Created by Sedlak, Michele: Medical Technologist Lead** on 10/22/2021, 12:30PM EDT

Updated Cancer Center tube station from 265 to new number 256.

**Last Approved by Sedlak, Michele: Medical Technologist Lead** on 10/22/2021, 12:30PM EDT

**Last Approved by Bacarella, Rebecca: Medical Technologist** on 11/3/2021, 11:13AM EDT

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Grammatical changes.

**Last Approved by Sedlak, Michele: Medical Technologist Lead** on 12/22/2021, 10:55AM EST

**Approval flow updated in place by Juleff, Gail: Project Mgr Policy** on 1/5/2022, 9:10AM EST

**Draft saved by Sedlak, Michele: Medical Technologist Lead** on 1/28/2022, 11:17AM EST

**Edited by Sedlak, Michele: Medical Technologist Lead** on 1/28/2022, 11:19AM EST

V.C. Added that a Hematology tech from Core Lab will go to Stat Lab to cover break. In the event this coverage is unavailable, a Chemistry tech may continue to run specimens. II. Removed salmon

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colored labels, as the Cancer Center no longer uses these.

**Last Approved by Sedlak, Michele: Medical Technologist Lead** on 1/28/2022, 11:19AM EST

**Draft saved by Masakowski, Megan: Mgr, Division Laboratory** on 1/28/2022, 2:37PM EST

**Edited by Masakowski, Megan: Mgr, Division Laboratory** on 1/28/2022, 2:37PM EST

Salmon color labels not available at the moment, changed to specified barcode label.

**Last Approved by Sedlak, Michele: Medical Technologist Lead** on 2/23/2022, 5:30PM EST

**Last Approved by Masakowski, Megan: Mgr, Division Laboratory** on 3/8/2022, 2:35PM EST

**Last Approved by Juleff, Gail: Project Mgr Policy** on 3/8/2022, 2:41PM EST

**Last Approved by Sedlak, Michele: Medical Technologist Lead** on 3/29/2022, 6PM EDT

**Last Approved by Blenc, Ann Marie: System Med Dir, Hematopath** on 4/8/2022, 8AM EDT

**Activated** on 4/8/2022, 8AM EDT

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