

May 2013 Hematology Department Meeting
Wednesday, May 29, 2013

Attending: Kay Schanuel, Julia Sauls, Susan Rowan, Vicky Douglas, Evan Evans, and Kathy Stanley.

1. Kathy's Section :

- a. Unit Practice Counsel (UPC): As part of the Memorial's Relationship Based Care model we are creating a Unit Practice Counsel for the lab. This group would be asked to help solve problems and issue that arise in the lab. Items like the dress code, development of standards of practice, shift handoffs, scheduling are items that could be addressed by the UPC. Ideally ~ 10% of staff should be on the UPC, meaning 10 members in the lab, covering all departments, shifts and staffing level, but not including supervisors We will ask that all staff nominate 2 co-workers for the UPC. Members of the UPC will be responsible for attending scheduled UPC meetings, helping to arrive at consensus based decisions, disseminating information about issues to their co-workers, bring issues raised by co-workers to the UPC. Nominated people would have to agree to serve a 2-year term on the UPC. More information on this will be forthcoming.

2. MobiLab – go-live May 30, after morning pickup.

- a. We will no longer require random number on aliquots – just date, your initials and specimen type (written or label).
- b. Remember to use the Iatric specimen receipt for MobiLab labeled specimens. Specimens with Meditech lab labels (ATC, Dr. Wades, O'Fallon, etc.) will still require receipt by sample type.
- c. ED drawn specimens must be labeled and received immediately so they do not get re-stuck by phlebotomy (they will be on their MobiLab list until we received the specimen in Meditech).
- d. Because out-patient Urine labels may not be printed (if they only specimens is a urine), it is essential that you keep the UA tracking list up and frequently check the out-patient pass-through for specimens. If you have a specimen with no UA order, check to see if it has Chemistry, micro or possibly a cytology orders.

See also e-mail sent on prior to go-live.

3. XN-2000:

The interface driver has been loaded. The interface will go through the Data Innovations (DI) server and then to Meditech. This will allow us to add auto-verification on the Sysmex in the future. Melissa is working on the DTS patches associated with the Meditech update on July 10th, when she is done with that, she will start on the interface build (along with Nancy).

4. Shift Handoff:

Carol and I are looking at the specimens left from the change of shift from nights to days. We have found that occasionally the night shift phlebotomists will hold their specimens

and bring them down in batch at 0600, explain why some 0400 ICUS draws were found in racks at 0600, not tested. Carol and I are investigating and will have more for the June department meeting.

5. E-tech checks :

There are too many times that the e-tech checks are not done for several days. In cases where an error is found, that means results are incorrect on a chart (EMR) for all that time and can be acted on. It is important that the e-tech checks are done each day. To help, we are going to divide the e-tech checks by bench – Coag will look at the previous days coag items (QC exception, corrected reports), UA will look at the UA and serology (worksheets, QC exceptions, corrected reports), and the Diff tech or Sysmex tech (or send outs on Wednesday), will look at the Sysmex, set-up bench worksheets, QC exceptions and corrected reports. We will still have a single folder for each day, but by spreading it out among the benches, it should make it take less time. You should initial those items you review (to show they were reviewed) and on the QC exceptions, you need to notate if the QC was actually repeated and was in range (look on analyzer or use QC data review in Meditech). The QC exception and corrected reports are printed by prefix (H, CG, UA) and can be separated and given to the correct bench when they print up (0900 daily). We will change the daily maintenance calendars to add clerical check as a daily task to sign off.

6. Competency/CEUs

MobiLab and Xn-200 training counts as a CEU credit on your competency. You are required to do 4 CEU activities each year as part of your competency. If you take a course worth 3 CEU credit, it will only count as 1 of those 4 required for competency. All MTS courses (except semen, which is required for competency) can be used for CEU or APDP credit. There is also on-line CEU available from Sysmex – just print the certificate when complete and give to Vicky or myself to use as CEU credit (if for APD, keep for your records).

7. Miscellaneous items

- a. Osmo worksheets – remember that Osmo are tested in duplicate (or more to get matching values) and we need to have a record of all values obtained. If you print a worksheet, make sure you record all values. If you do not print a worksheet, make sure you enter all the values you obtain as a hidden comment.
- b. LabMart supply items. –Chem brought this up – we intended upon moving the supplies to the back room (the old pit stop) that we would not keep large numbers of supplies in the department as you can grab as needed from the back. However, it seems wise to keep a small amount in the department (i.e. – 2 boxes of each size gloves) because when you need something, it may not be the best time to run to the back. We are also looking at a small cart for the back room, to make it easier to bring multiple items to the department.
- c. Urine for Chemistry – If there is a cup for a urine specimen that has chemistry testing, please place this cup in the Bally in the Chemistry urine bin. Do not leave out on the counter.
- d. There was a discussion about lab processing and reminding all techs (Chem and Heme) to answer the tube system as needed) I will send an e-mail out regarding this issue.