January 2015 Core Lab Department Meeting

Tuesday, January 27, 2015

Attending: Melissa Huschle, Vicky Douglas, Joyce Kniepmann, Carolyn Wade, Anita Konieczny, Nancy Buckley, Linda Althardt, Patty Isbill, Beth Albrecht, Kathy Stanly, Evan Evans.

1. Night shift Maintenance – ideas/suggestions
2. Nights shift will take over both Cobas maintenance starting the week of Feb 22nd.
3. We will have evenings place the Cobas 2 line in standby by the end of their shift and have them print the reagent status screen, replace all yellow and purple alarm reagents as well as other non-alarm reagents (Cell-Clean, Cell-wash, ISE reagents) and reprint the reagent status report.
4. At this time nights will only perform the maintenance on the Cobas, they will not be responsible for any Heme or Centaur maintenance (except the automatic daily wash on the Centaur).
5. Carmella and I have been sending e-mail to nights in regards to the items we have found on days, but overall I think Nights is doing a very good job.
6. Auto-Verification – Much thanks to Nancy for all her hard work on this project.
7. STA went live early (Jan 18th) and is working well. Reminder for cross-trainers – if you work in Heme one day and Chem the next, you will need to modify (filter) your DI screen for the analyzer you are working at. Yes – you can monitor both the Cobas and STA at the same time if you wish (and any other instruments as they are added to auto-verification – you will need to keep open an MCare batch for each analyzer).
8. Yes – we have a request tin for a second monitor for the Sysmex, still waiting on that.
9. Centaur is next – Nancy plans on moving this to live this week for further testing and then a go-live date will be set for February).
10. DI upgrade – the canceled upgrade will be done on a Sunday in early March.
11. Sysmex – once we have the DI upgrade done, Nancy will start working on the Sysmex.
12. Iris – will be done either late 2015 or 1st quarter 2016.
13. Staffing issues – evenings and nights shift openings.
14. We have a full-time Night (Brandon) and Evening (Jan Worms) position to be filled. Kathy is trying to expedite their approval, but expect many requests to fill the empty positions and some off-shift scheduling. We have a couple of possible per-diem candidates.
15. The weekend of February 28th/March1st we will go-down one person on dayshift weekends – Chemistry will have 2 techs, Heme 2 and then a float tech (who will be LP on Sunday) It is very important that everyone in the Core Lab help out in Lab processing to cover breaks and lunch, as well when it gets busy.
16. Micro will start GC/CT testing on February 5th. That will change Chem staffing – Electrophoresis will be done on Tuesday and Fridays (all specimens will need to be frozen) and clerical will move to Mondays. We will no longer have a maintenance tech on Thursdays (the electrophoresis tech can perform any odd maintenance items). This was going to take effect with the Feb 22nd schedule, but may be moved up due to item 1 above.
17. Cross training will continue, as we need to look at the Shiloh hospital opening in 2016 and our own needs the more cross-trainers we have, the more flexible we can be with scheduling.
18. 2015 Surveys/Competency –
19. New vendor this year (API) along with CAP and WHSL.
20. Competencies due 10-15-2015. Please make sure to complete it early and give to Vicky and Carmella to allow yourself time if something is missing. If you hand it in on the 15th and you have something missing, you will be considered late.
21. Send-out staff does not have to complete the Hazardous shipping training this year (unless you get trained this year) as the certificate is good for 2 years.
22. As part of competency you need 4 CEU hours – if a session gains you 1.5 CEUS, then you only need 2.5 more for the year.
23. GC/CT
24. Micro will go live with testing on the Cepheid on February 5th. They have new swabs (for females only) and urine kits (for all males or females too). We anticipate that we might see a few stragglers with old swabs or urine UPT tubes, which Chem will run.
25. We are running short on our current UPT tubes – when we are out, we will place specimens in the new urine tubes for the Cepheid. Instructions for their use will be available in Lab Processing.
26. General items:
27. Platelet clumps – if you N/A a CBC due to a platelet clump flag and look at the slide you have to make it at least a smear review to get credit for this.
28. Path reviews –
    * 1. When entering the specimen numbers please include the date – over a weekend we have seen several times repeating accession numbers submitted.
      2. If an automated diff indicates a path review based on % (> 90% Neutros, > 20% Monos, etc.) – you can wait to order the path review until you perform the manual diff and see if it is still a path review. Remember that any bands, meta or myelos should be included as neutrophils for path review, however if adding a path review for immature grans, only the metas and myelos should be counted.
29. Call list/Criticals-
    * + 1. Remember place all Out-patients critical values on the call list unless you call it yourself. The call list is how C&D monitors if the call has been made.
        2. When you call to OP make sure you put the name of the person you called – we have had an incident where Tasha’s name was entered in a comment and she was not working that day.
        3. If you order a HHC test at it requests the result to be called, please remember to enter Y for Call on the Doctor page in enter/edit req so it goes on the call list so C&D will know to call it.
30. Misc. send outs – please write the storage requirement on the aliquot (R, RT, F0 so if someone else is putting the specimen away, they know how it is stored.
31. Vanco troughs that are critical – when you call the floor, if they say that the dose was given before the draw, cancel the test. Also inform the RN that they will need to contact pharmacy to re-order the trough draw.
32. Combined Cell-Clean – There are questions regarding if a bottle is combined or is set aside to be combined – I will create a label that can be placed on the bottle to hopefully clarify this.
33. If you see a pop-up that states “OE request cancellation” – this means that the floor tried to cancel the order after we had received the specimens – ignore this and report out the test if it is completed.
34. OP urine labels – There is inconsistency if we receive mobi-lab labels, MCare labels or are told if a patient is going to return later with a specimen. I will talk to Robyne and registration about this issue. Please remember that if the only test the patient has is urine you will not get any labels as there is no reason for them to be scanned in Mobi.
35. Kathy’s section
36. MMG is getting a new EMR system that will allow results to go from MCare directly into the patients EMR – this should help reduce faxing (and calls for faxes) from MMG physicians.
37. St. Elizabeth’s was denied their CON (certificate of Need) request at this time – they are expected to re-submit with changes.
38. Lab Town Hall meetings on February 5th at 1400 in the auditorium and February 26th at 0800 in the lab conference room. Mike McManus (COO) and Ruth Holmes will be there for you to ask any questions or address any concerns you might have.