

February 2016 Core Lab Department Meeting.

Tuesday, February 23, 2016

Attending: Nancy Buckley, Beth Albrecht, Diane Weihrauch, Denise Manning, Chris Zalocusky, Patty Isbill, Paula Swierczek, Kay Schanuel, Carmella Blacet, Chris Battaglia, Joyce Kniemann, Bruce Reece, Evan Evans.

1. Aliquots – Random #, initials and date and time (if label not correct). Specimen type (serum, plasma, urine, etc.) are also required. Reminder that lab policy states that the lab uses 3 initials, not just 2.
24 hour urines – you must write the total volume and start and stop date and time. We've had a couple of recent specimens that had to be recollected as this information was not recorded *anywhere*!
Remember to freeze all aliquot tubes for urine E/IFEs – an original aliquot as well as the concentrated urine. Make sure the concentrated specimens are labeled as such so the SPE tech doesn't have to guess if it has been concentrated or not. The original cup should also be retained, but not frozen.
2. New procedures – All procedure have been or are going to be revised. We making the header and format the same throughout the hospital and there will be a new on-line area for the procedures.
If there is a correction to be made – please make sure you tell Vicky, Carmella and I so we can make the changes – we have some red ink corrections in procedures that we were unaware of.
3. New STA Compact Max – Sorry for the hurried nature of the go-live. While the instrument is very similar, there are some differences that we should have been more prepared for. Overall, though, I everyone is doing well. My thank to Vicky for all the time she spent with training sessions for all three shifts.
4. New IRIS – We will go-live in March, once we have new procedures written and some additional training.
5. Lab Processing – welcome to Angel. Angel and Kim will be working 12-hour shifts covering Monday – Saturday. They will each work 3 days/week, 0600-1830. We are also going to start training Kristen, who will be the lab processor for East – she will also have trianign in Histo and send outs.

6. Training – I know we've had a lot lately and we will still be going on for many more months as we make sure we have the correct staffing to ensure PTO time, holidays and such are covered. Please remember to stay on top of the training checklists, checking them daily with the trainees.
7. HFAP and CAP inspection – HFAP is the hospital-wide survey that will probably occur in March – you've seen all the e-mail regarding this. The Lab has only a few items that they look at, as we are inspected by CAP. Speak of which – CAP will be here later this year (but at least our procedures will be up to date and reviewed well in advance). One thing I will say is that we probably should be using gloves more frequently than we do. Not everyone, and I realize I am one of the biggest offenders, but the Lab policy states that gloves should be worn whenever handling specimens, with the exception of stained slides.
8. BJC – I know there are a lot of questions and few answers at this time. Administration focus is on the HFAP and East opening, once those are past, more information will come out. I do know that Memorial and BJC are working to make each other an in-network hospital by either the end of the first quarter or early in the second quarter. This benefits Memorial 2 ways; we can use Barnes facilities and physicians when needed at no extra cost, and Barnes employees and families can use our facilities (and 30% of BJC employees live in the Metro East).
9. Phlebotomy issues – Remember to be nice and professional on the radio. When you have continued issue (multiple short draws, attitude, etc.) make sure I am aware and I will take to La'Rhonda.
As far as short draws, I have talked to La'Rhonda about this and we agree that to foster better communication it would be nice to have a tech attend the next C&D meetings (and to have techs attend some future C&D meetings) to clear any mis-understandings. The next C&D meetings are March 7th at 1300, and March 8th at 0700 and 1430. For these we should discuss proper fill and minimum fill and bring examples. La'Rhonda has said she will put us first on the agenda, so it will only be at most 10-15 minutes. Any tech interested in doing this please contact me.
Also – in meetings we discussed the C&D office, faxing and phones – La'Rhonda is aware of this and is working on making sure *all* the C&D staff are trained to fax and answer questions (at least pick up the phone) and such. It's part of her plan to spread this knowledge so it's not done but just a few people (i.e. Tasha or Marlene).
Also – we have been very fortunate that tech having to cover C&D has been pretty light for the last year or so, which is good, but when we are called to cover, we all have trouble remembering how to use the Mobi and such. We have been talking in Sups meeting about

how to address this – do we limit the number of lab tech who go out-front to draw (and how do we compensate those who are willing to)? In the meeting the thought was to send the tech to cover the C&D desk, however that person is the first one to help cover OP now (which is why we get more phone calls in back – a vicious circle). Also, currently C&D has 4 full-time positions they are trying to fill, so we might see an increase in requests for help.

Speaking of phones – the sheer number – I will bring up at the next Sups meeting.

10. Chem – make sure you check the sheet by the sink as to which Roche reagents we can dump and recycle and which should just be red-bagged. The list is ever changing as we get updates from Roche.
11. Computer items – Nancy is working on auto-verification for the Sysmex – we hope to have live with the East opening.
October– we will start working on the switch to Cerner Millennium, with a go-live scheduled for July 2017.
12. In case you were not aware, Kathy is retiring on July 1st. She is going to stay for at least 3 months after to help guide the new Lab Director and help the transition.
No – I am not interested in the position, I like what I am doing.
13. Thanks to everyone for all the hard work – between training and high volumes I know it is been very busy. Overall, considering the workload, training and then new employees, while our Turn-around time has slipped a little, it's still very good. Keep up the good work!