Hematology Department Meeting

Tuesday, March 20th, 2010

Attending: Vicky Douglas, Bruce Reese, Susan Rowan, Kay Schanuel, Julia Sauls, Evan Evans, Kathy Stanley, Robyne O’Mara.

1. Shift Hand off: Discussion of formalized hand-off between shifts. All shift handoffs must be also be verbal within the department (not the time clock).

Sysmex/Diffs/Coag: At 1400 print HEME (selection profile) tracking list. Write disposition of each specimen – as completed cross off. Any routines received after 1400 – leave for evenings. Stats and ICU specimens should be run when received. Diffs – complete any slides, routine slide in stainer at 1400 can be left, STAT slides should be completed by 1430. Print STA QC summary (use preview – print 1st two pages) – highlight when QC done. IF any reagent of QC set to expire by 1530, make up new so it can be added to analyzer by evenings. Empty biohazard trash that is > ½ full. Clean and disinfect counters and keyboards. Place full storage racks in Bally.

UA: print 2 UA, SK tracking list (from ordered and received): write disposition of each. Same rules apply as above. Dispose of all urines that are > 24 hours old by 1400.

There will be a checklist for the items not on the tracking list. The checklist and tracking list for each shift will be placed in my inbox for review.

Night will be held to the same checklists and tracking list printouts – time TBD.

Once these have been finalized a policy will be written and a start date will be announced.

1. Critical values: Remember to call ALL critical values on Out-patients to C&D and notate in Meditech (use CCD comment code). It is crucial that these be notated and called within 1 hour so the physician can contact the patient to possible treatment. Inpatient critical also need to be called, or if a WBC and/or PLT that is repeatedly critical the print comment added, once we call nursing has 1 hour to contact the physician (they are being watched for this.
2. Department staffing: As auto-verification moves we will have to reduce staffing hours. It will be either later this year or next before auto-verification reaches Heme. I want everyone to think of ways to combine benches or ways to reduce hours. Try to think about the core lab – is there a job/bench that can be shared with Chemistry? We may have to cross-train some chem techs to do Heme jobs and vice-versa. We have time now, so what ideas can we come up with.
3. Send-out issues:VAGPATH – vaginal patholgens to ARUP can only be performed using the BD affirm specimen tube. If a specimen other then the BD affirm tube is received DO NOT send it out for a VAGPATH. Determine what type of tube it is and what testing can be done. If we receive a viral transport media (VTM) then no bacterial testing can be done. If a swab is received and the order is for bacteria/yeast – this will be done in micro. Later this year micro will begin performing the BD affirm testing and this will not be an issue.

AFB specimens – ARUP is reporting leaking AFB specimens – they are saying we should try to NOT put parafilm around the cap – in transit the pressure causes the parafilm to tighten, then loosen, casing a gap between the tube and the cap. I will ask Micro to not parafilm AFB specimens.

Also – when we have three separate bronc wash specimens from that have the same collection time, ARUP see it as one specimen. I will ask Micro when ordering these to make sure they give a different collection time to each specimen.

1. IDPH transportation training: This must be done by June. There are 3 sections to be done. Yes we have to do the radiation one – the State says we have to.
2. PKUs: Please have these packaged and ready to go by 1400 (Monday-Friday). Place in the interoffice mailbox in the lab admin area (it is pickup at 1415). On Saturdays the envelope should be picked up at the front desk by 1200. If it is not picked up inform me so I can make sure UPS does come. The State grades us on how often they are delivered within 3 days of collection – last quarter over 20% were > 3 days old.
3. C&D coverage – Robyne address both Heme and Chemistry and there were several good points brought out. I will e-mail them separately to all techs. Once the front area is remodeled and registration is also ordering we will still have techs out there to draw. At this time techs will nto be required to draw children or infants, however any tech that wants to can be taught (yes – actual training with a phlebotomist). Please remember that the front desk C&D days are preserving your working hours, if we didn’t have the techs working in front we would have to require all techs to reduce (permanently) their scheduled hours to allow us to hire phlebotomists. Anyone wishing to (permanently) reduce their scheduled hours can see Jan or Kathy.
4. From Kathy – She wanted to state that January and February were the busiest months that anyone in the hospital can remember and she thanks everyone for their hard work and dedication.