

To Our New Employee,

Pathology Department

Peter A. Dysert II, MD Chief, Department of Pathology

3500 Gaston Ave. Dallas, TX 75246 214-820-3021 214-820-2535 Fax www.BaylorHealth.com

On behalf of the staff of the Department of Pathology at Baylor University Medical Center, I would like to welcome you.

Baylor has a rich heritage that spans more than one hundred years. The lab has played an important role during this time. There are nine labs in our department with more than two hundred employees. We perform approximately three million tests annually.

Quality and Patient Safety have always been the focus of the service we provide to the hospital. I challenge all of our employees to continually bring forward new ideas and seek ways to improve our quality processes.

In addition, Baylor is constantly striving to find better communication pathways for all of its employees. Please take advantage of these opportunities so that Baylor remains the premier healthcare destination in the Dallas/Fort Worth area.

Welcome to our team!

Together we can help Baylor achieve its mission to deliver  $\underline{S}$  afe,  $\underline{T}$  imely,  $\underline{E}$  ffective  $\underline{E}$  fficient,  $\underline{E}$  quitable,  $\underline{P}$  atient-centered care (STEEEP).

Best Regards,

Pete Dysert, MD Chief of Service

Department of Pathology



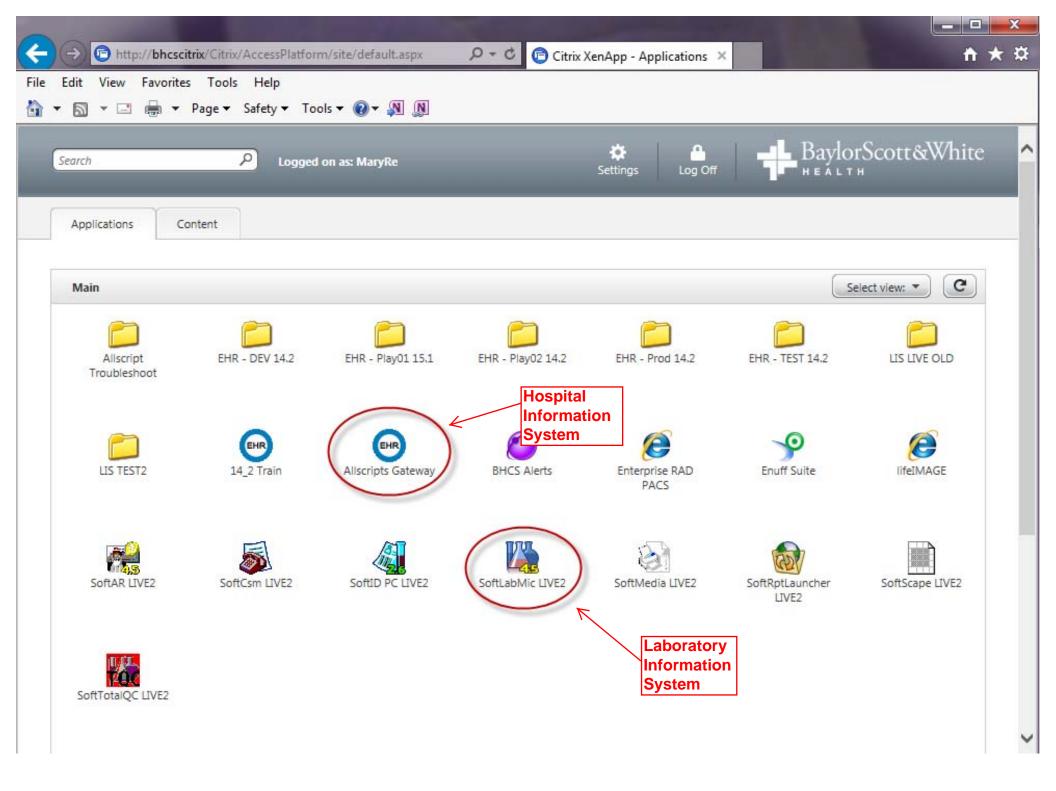
#### Department of Pathology

#### **Laboratory Orientation**

#### **Table of Contents**

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# AP LIS – PowerPath Located on desk top



Tools and Applications

All Sites

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Resources

About Us -

About You -

Policies and Procedures Index

News ▼

Tools and Resources

Team Sites

Order Sets Index

Home > Tools and Resources

#### Tools and Resources

These sites are relevant across Baylor Health Care System, are intended for all employees and support patient care, operational areas and strategic initiatives, respectively. Patient Care Resources Operational Resources Strategic Initiatives

Forms Index

Clinical Ethics and Supportive/ Palliative Care Diabetes Education For Physicians Infection Prevention and Control Mission and Ministry

Cardiovascular Services

Baylor Safe Choice CBRE Central Records Corporate Compliance Employee Health Environmental Safety and Emergency Management

Electronic Health Record Follow MyHealth ICD-10 Lean Process Improvement Policy and Procedure Library

Policy and Procedure Documents/Templates

The Policy and Procedure Library will serve as the single point of access for business unit policies and procedures. The library is an easy-to-search on to find all Baylor policies and procedures, now organized by entity, including policies.

#### NEW: Policy and Procedure Documents/Templates

Newly approved templates and quick start guide have been added to this s

#### Looking for a Policy?

Here is a guide do help you navigate the Policy and Procedure Library.

#### Policy and Procedure Library

Baylor Scott & White Health Policy and Procedure Library [4] Baylor Health Care System Policy and Procedure Library [4]

Baylor All Saints Medical Center at Fort Worth <a></a>

Baylor Ambulatory Endoscopy Center 4

Baylor Health Enterprises [4]

Baylor Heart and Vascular Hospital 🛂

Baylor Medical Center at Carrollton [4]

Baylor Medical Center at Garland [4]

Baylor Medical Center at Irving

Baylor Medical Center at McKinney [4]

Baylor Medical Center at Waxahachie 🛂

Baylor Regional Medical Center at Grapevine 🛂 Baylor Regional Medical Center at Plano 🛂

Baylor University Medical Center at Dallas 🛂

Diabetes Health and Wellness Institute

HealthTexas Provider Network

Our Children's House

The Heart Hospital Baylor Denton 🛂

The Heart Hospital Baylor Plano 🛂

For users with secured policy access, log in here 4.

The Baylor University Medical Center library contains system and facility specific documents.



















Policy Name:

SWH 01/2005

Professional Appearance and Dress Code

Department/Service Line: Policy Identifier: BSWH Human Resources

SYSTEM.HR.WKPL.001.P Location: Date of Last Review: Origination Date: BHCS 01/01/1983 09/01/2014

Approved By:

All

Human Resources Policy Review Team

#### SCOPE

The Professional Appearance and Dress Code Policy (the Policy) applies to employees, volunteers, students, and contractors of Baylor Scott & White Holdings and its Controlled affiliates (collectively, "BSWH System").

#### PURPOSE

The purpose of this Policy is to provide guidance on acceptable dress and appearance in the workplace to (1) protect patients by preventing the spread of infection, and (2) present a safe and professional appearance at all times. Departmental and/or regulatory/governmental standards may be applicable due to safety requirements, the nature of our work environment, and infection control quidelines.

#### POLICY

Your appearance affects the impression visitors have of BSWH System and the confidence patients have in our staff. Certain styles and fashions may not be appropriate dress for all employees. We aim to ensure that moderation and professionalism are exercised while still allowing you to maintain a certain degree of freedom in dress and appearance.

To ensure an appropriate image is projected, all employees should present themselves in a professional manner. Your appearance should reflect the confidence our patients and visitors have placed in us, and not attract undue attention or cause disruption in the workplace. You will not wear clothing or accessories that may result in inconvenience, injury or insult to patients, visitors or co-workers.

If you're dressed inappropriately and it creates a disruption in the workplace, you may be sent home to change. This time away from work will not be "paid time". Continued failure to comply with this policy may lead to corrective action, up to and including separation from employment.

1 Clothing Guidelines

Document name:

#### Professional Appearance Dress Code

Path: Show Full Path

BSWH.HR.WKPL.001.P Policy Number.

Created on: 08/08/2014 09/23/2014 Published on: Last Review on: 09/01/2014 09/01/2017 Next Review on: Creator Admin, System Other Title (Not on List)

Committee: BSWH-Human

Resources

Owner: Greene, VP HR Strategic Business

Services, Queen Vice President

Manager: Uhl, Employee Relations Business

Partner, Beatrice Other Title (Not on List)

Greene, VP HR Author(s):

> Strategic Business Services, Queen

Vice President

Approver(s): Policy Review Team,

> **Human Resources** Other Title (Not on List)















Policy Name:

Laboratory Personnel Files

Department/Service Line: Policy Number:

Lab BHCS.LAB.QM.0204.P\_

Location: Origination Date: Date of Last Review: BHCS Laboratory 9/1/2012 11/21/2013

Approved By:

**CLIA Director** 

#### SCOPE

This policy applies to Baylor Health Care System Laboratory (BHCSL) employee files created and maintained by the Department.

#### PURPOSE

To appropriately document personnel records to meet or exceed regulatory requirements.

#### POLICY

- It is the policy of BHCSL to comply with all regulatory requirements related to the documentation of personnel qualifications and records.
- It is the policy of BHCSL to review personnel qualifications at the time of hire against CLIA regulations for the testing to be performed in order to ensure that the individual is qualified to perform in the job position.

#### DEFINITIONS

When used in this policy, these terms have the following meaning:

BLN: Baylor Learning Network

HR Workways: the computer application used within BHCS for employee records

#### PROCEDURES

- A. Creating a File
  - Initiate a Personnel File Checklist form for that employee and place in the folder.
  - 2. Note hire date (start date) on Checklist.
  - The following elements are required to be maintained either in the department file or the employee file in Human Resources.
    - a. Resume
    - b. Job description

ш,

#### Document name:

#### **Laboratory Personnel Files**

Path: Show Full Path

Policy Number: BHCS.LAB.QM.0204.P

V1

 Created on:
 10/14/2013

 Published on:
 01/20/2014

 Last Review on:
 11/21/2013

 Next Review on:
 10/01/2015

 Creator:
 Admin, System Other Title (Not on List)

Committee: BHCS-Lab

Manager: Fouche, Lab Quality
Program Manager, Jan

Manager

Author(s): Abu-Hijleh, Admin. Lab

Director, Ohoud

Director

Casas, Laboratory Director, Vivian

Director

Roberts, Lab Quality Program Director BSWH, Donna

Director

Tassan, Laboratory Manager, Pamela

Manager

Whitmore, Admin. Lab

Director, Joni
Director

White, BHVH

Laboratory Director,

Deborah Director

Newhouse, Admin Lab

Director, Mike Director

Hutchison, Admin Lab

Director, Becky

Director

Stanton, Admin. Lab Director, Allen

Director















This file includes fillable form fields.

You can print the completed form and save it to your device or Acrobat.com.





Policy Name:

Non-Conforming Events

Department/Service Line: Policy Number:
Lab BHCS.LAB.QM.0276.P

V2

Location: Origination Date: Date of Last Review: BHCS Laboratory 9/1/2012 See metadata

Approved By:

CLIA Director

6/17/2015 09:14

#### SCOPE

This policy applies to all occurrences or non-conforming events that occur within the Baylor Health Care System Laboratory (BHCSL).

#### PURPOSE

The purpose of an occurrence management program is to capture and analyze information from non-conforming events to identify systematic problems and gain management's commitment to removing the cause.

#### POLICY

It is the policy of BHCSL:

- 1) to capture information on non-conforming events, and
- to report serious errors that impact patient care to the Risk Management department via the Midas Event Reporting System.

#### DEFINITIONS

When used in this Policy these terms have the following meaning:

**Nonconformance:** non-fulfillment of a requirement. Other terms frequently used include accident, error, event, incident, nonconformity and occurrence.

Adverse event: untoward incident, therapeutic misadventure, iatrogenic injury, or other adverse occurrence directly associated with care or services provided within the jurisdiction of a medical center, outpatient clinic, or other healthcare facility.

Close call: event or situation which could have resulted in an adverse event, accident, injury or illness, but did not, either through chance or through timely intervention.

Corrective action: action to eliminate the root cause of a detected non-



Document name:

#### Non-Conforming Events

Path: Show Full Path

Policy Number: BHCS.LAB.QM.0276.P\_

V2

 Created on:
 01/04/2013

 Published on:
 12/01/2014

 Last Review on:
 01/10/2014

 Next Review on:
 01/10/2016

 Creator:
 Admin, System

 Other Title (Not on I)

Other Title (Not on List)

Committee: BHCS-Lab

Manager: Fouche, Lab Quality

Program Manager, Jan

Manager

Author(s): Abu-Hijleh, Admin. Lab

Director, Ohoud

Director

Roberts, Lab Quality Program Director BSWH, Donna

Director

Alston, Lab Manager,

Connie Manager

Hutchison, Admin Lab

Director, Becky

Director

Martin, BMCI Lab Director, Becky

Director

Newhouse, Admin Lab

Director, Mike

Director

Stanton, Admin. Lab

Director, Allen

Director

White, BHVH

Laboratory Director,

Deborah Director

Whitmore, Admin. Lab

Director, Joni

Director

#### BAYLOR HEALTH CARE SYSTEM LABORATORY

NONCONFORMING EVENT FORM  CONFIDENTIAL QUALTIY ASSURANCE DOCUMENT (title 38, USC Section 5705)				
FACILITY				
LAB SECTION	DATE	COMPLETED BY		
	TYPE OF NONCONFORM			
	NATION (errors in orders/sample o			
Accession #	Order #	Donor/unit#		
☐ Patient ID conflict	☐ Unacceptable sample	☐ Delay in transport		
☐ Mislabeled sample	☐ Unlabeled sample	Coll'd: Rec'd:		
☐ Conflict between	□ No phleb ID	Wrong unit info entered		
☐ sample & computer	□ QNS	Donor # Exp. Date ABO/Rh		
$\square$ Mispoured sample	☐ Wrong tube			
☐ Wrong bar-code label	□ Other			
□ Other	$\square$ Wrong test accessioned	Comments:		
☐ Missing requesting MD	$\square$ Wrong sample accessioned			
(Information on tube/label/request)		(Correct patient information if known)		
Patient Name Patient ID		Patient Name Patient ID		
Patient Location	Phleb	Patient Location		
	ts: Other accn. from same date/time?	<del></del>		
EXAMIN	IATION (includes problems with te	sting delays/quality of results)		
Accession #		-		
☐ Testing not performed correctly		$\square$ QC not performed correctly		
$\square$ Failure to follow procedures (testing/follow up)		$\hfill\square$ Results verified before testing completed		
☐ Method/system problem (inc. sample problem)		$\square$ Blood issued improperly		
$\square$ Testing delayed/TAT not met		☐ Other		
$\square$ QC not performed (enter name of e	employee)			
Description of Nonconforming Event				
DOSTEYAMINAT	TION (includes errors in interpretir	ng/data entry/transmission of results)		
Accession #	· · · · · · · · · · · · · · · · · · ·	onor/unit#		
☐ Data entry error, eg.,wrong# or de		☐ Results misinterpreted		
☐ Results misidentified, i.e., wrong test reported		□ Calculation error		
☐ Results misidentified, i.e., result reported on wrong patient		☐ Critical value, MD/RN not notified		
☐ Transcription error from worksheets/tape		☐ MD not notified of BB problem		
□ Other		☐ Improper administration of blood		
		Improper dammed definition of blood		
Description of Nonconforming Event				

#### BAYLOR HEALTH CARE SYSTEM LABORATORY

REVIEW/CORRECTIVE ACTION					
Assessmen	nt completed by			Supervisor	/Date
<u>ORIGIN</u>	□ Lab	<u>TYPE</u>	☐ Preexamination	SEVERITY	
	☐ Nonlab		☐ Examination		
			☐ Postexamination		
			<u>CAUSES</u>		
☐ Random	incident-no process probler	n identified		Comments	3
☐ Equipme	ent problem property #			Comments	3
☐ Supply/	reagent problem			Comments	3
☐ Software	e problem (Medical device? I	No Yes)		Comments	5
☐ System/	Process problem New Recu	ırring - action	pending	Comments	5
☐ Affe	cts only 1 section	☐ Affects all	/most of lab	☐ Affects	all/most of facility $\hfill\Box$ Software
☐ Employe	ee-lack of knowledge, i.e., tr	aining needed	I	Comments	5
☐ Employe	ee performance issue		Comments		
			CORRECTIVE ACTION(S)		
☐ Random	incident - no additional follo	w-up needed		Action take	en:
☐ MD cont	tacted (Outcome: 🗆 No Adv	erse effect on	patient $\square$ Patient Dx or Rx ch	anged - detai	ls on back)
☐ Training	provided (Specify date:		☐ 1 employee	☐ All affec	cted employees
☐ Evaluate	e employee performance (i.e	., recurring p	roblems not due to training)		
☐ System/	/process/procedure change r	equired to pre	event recurrence - additional de	tails on back (	of sheet
	☐ New problem		Action Taken/Required		
	☐ Recurring		Action Still Pending		
☐ Other					
☐ Forward	led to Administrative Dir for	Quality Manag	gement	Reviewed	Date
	☐ Midas Event Initiated		☐ FDA Report Initiated		☐ Email message Sent
	☐ Sentinel Event Analysis		☐ NOT reportable to FDA		☐ Other
	Blood Bank Section (add	itional infor	mation required for all nonco	nforming ev	vents involving Blood Bank)
System Inv	volved				
	$\square$ Blood collection		$\square$ Component process/mod		$\square$ Compatibility testing (inc. sample)
	☐ Donor testing		$\square$ Labeling/record review		$\square$ Blood administration
			$\square$ Storage/distribution		$\square$ Information management
Immediate	corrective action to prevent	consequence	s or correct a negative impact o	n patient out	
			Date/Time		By Tech
	☐ Customer(s) notified			<u> </u>	
	$\square$ Equipment taken out of	service	-	_	
	$\square$ Unit quarantined			_	
	$\square$ Reagent/supply taken of	ut of service			
	$\square$ Unit discarded				
	$\square$ Testing repeated				
	☐ Unit recalled				

#### BAYLOR HEALTH CARE SYSTEM LABORATORY

NONCONFORMING EVENT EVALUATION FOR FDA/JOINT COMMISSION IMPLICATIONS				
	a. Was error/accident related to manufacturing	ng process your facility performed?	□ No	☐ Yes
b. Does the error/accident involve a transfusion-transmitted disease?		on-transmitted disease?	□ No	☐ Yes
	c. Does the error/accident involve a transfusion?		□ No	☐ Yes
	→ Does the error/accident involve a death?		□ No	☐ Yes
	→ Did the transfusion involve hemolysis?		□ No	☐ Yes
d. Did the transfusion involve an ABO mismatch/		tch/	□ No	☐ Yes
	e. Could the error/accident affect safety, purit	ty or potency of the product?	□ No	☐ Yes
	Was the product made available for distribution	on, i.e. has a biological		
	product been determined to meet all of the re	elease criteria and to be		
suitable for distribution, whether or not actual distribution has occurred?			□ No	☐ Yes
System/pro	cess/procedure change required to prevent rec	currence		
☐ Policy re	vision Number	Date		
☐ Software	<u> </u>	Date		
☐ Medical Device Report submitted (if appropriate)				
Review Sig	nature/Date			
_				
Review Sig	nature/Date			
Review Sig	nature/Date			















#### Policy Name:

Reporting and Responding to Employee Concerns Department/Service Line: Policy Number: Laboratory BHCS.LAB.QM.0558.P\_ V1

Date of Last Review: Location: Origination Date: BHCS Laboratory 9/1/2012 2/1/2014

Approved By:

CLIA Director

6/17/2015 09:21

#### SCOPE

This policy applies to problems or concerns expressed by any Laboratory employee or CLIA director.

#### PURPOSE

Employee concerns for quality, safety, and work flow are important indicators of the quality of the overall management of the laboratories. As such, employee concerns are included in the overall quality management program of the Laboratory.

#### POLICY

It is the policy of BHCS Laboratory to provide a mechanism to employees to express concerns regarding quality and safety.

#### DEFINITIONS

There are no additional defined terms associated with this policy.

#### PROCEDURES

- A. Reporting Employee Concerns
  - 1. Any employee who has concerns about safety or the quality of testing within the Laboratory should report those concerns.
  - 2. Communicate concerns to the direct supervisor.
  - 3. Should the direct supervisor not respond appropriately, communicate concerns to the CLIA Director or designee or to the Laboratory Administrative Director.
  - 4. Laboratory Administrative Directors actively seek input regarding concerns from employees during regular meetings and employee rounding.



#### Document name:

#### Reporting and Responding to Employee Concerns

Path: Show Full Path

Policy Number. BHCS.LAB.QM.0558.P

Created on: 01/04/2013 Published on: 02/11/2014 Last Review on: 02/01/2014 Next Review on: 02/01/2016 Creator: Admin, System Other Title (Not on List)

Committee: BHCS-Lab

Manager: Fouche, Lab Quality

Program Manager, Jan

Manager

Abu-Hijleh, Admin. Lab Author(s):

Director, Ohoud

Director

Alston, Lab Manager,

Connie Manager

Hutchison, Admin Lab

Director, Becky

Director

Martin, BMCI Lab Director, Becky

Director

Newhouse, Admin Lab

Director, Mike

Director

Roberts, Lab Quality **Program Director** BSWH, Donna

Director

Stanton, Admin. Lab Director, Allen

Director

Tassan, Laboratory Manager, Pamela Manager

White, BHVH

Laboratory Director,

Dohorsh



Attachment Name:	
Employee Concern Form	
Attachment Number:	Date of Last Review:
BHCS.LAB.QM.0558.A_V1	6/1/2012

Name (optional*)		Date:	
Extension (optional*	)		
Nature of Report	☐ Complaint	☐ Concern	
Issue Type	☐ Safety	☐ Quality	
Describe the issue.			
Direct Supervisor Re  Direct Supervisor Sig	view and Comment (	include date)	
		Review and Comment (inc	 lude date)
Lab Admin Director S CLIA Director Signat	ure		
Resolution (include o	late)		
Communicated to En	nployee (date)		
Additional Follow up	(include date)		
Lab Administrative [	 Director		Date

All Sites



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Home

#### myLinks

- Chargemaster database
- Lawson
- CBRF
- BUMC Pathology
- Phonebook
- How do I set myLinks?
- HR WorkWays
- Email
- eTIME
- Clinical Links
- Tools and Applications
- Policy and Procedure Library
- myBaylorScottandWhite

#### Calendar

There are no active items in the calendar.



What's the Idea: New Book Covers How Ideas Impact Health Care



elp at-risk

#### Headlines



Carl Couch, MD, MMM Transitions to Vice President of Innovation Cliff Fullerton, MD, MSc, is Baylor Scott & White Quality Alliance new president.



Cliff Fullerton, MD, MSc, is Baylor Scott & White Quality Alliance New President Carl Couch, MD, MMM transitions to vice president of innovation.



American College of Cardiology Selects Dr. Dehmer for Significant Award Gregory J. Dehmer, MD, was recently awarded the Master of the American College of Cardiology designation — an honor reserved for three practicing cardiologists each

#### Baylor Dallas Makes Becker's 100, and Makes Us Proud

We've always known Baylor Dallas was a great hospital. Becker's Hospital Review wholeheartedly agrees. They've released their annual 100 Great Hospitals list and of Dallas hospital made the list.

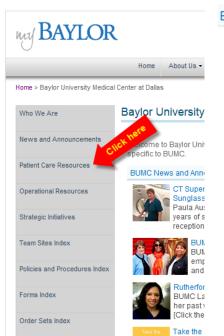


It's Not a Sprint. It's the Baylor Tom Landry Triathlon.

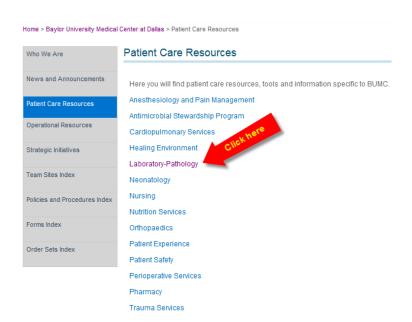
Diabetes Health and Wellness Institute and Tom Landry Fitness, C kids compete in April's triathlon.

#### **BUMC News & Announcements**

BUMC Home In



Please co



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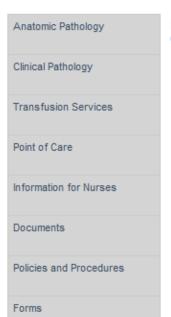
News -

Tools and Resources

Team Sites

Contact Us

Home > Baylor University Medical Center at Dallas > Patient Care Resources > Laboratory-Pathology



#### Laboratory Pathology Services



#### F PATHOLOGY BAYLOR UNIVERSITY MEDICAL CENTER - DEPARTM

Organization char The mission of the Department of Pathology is to ment laboratory aon, expanding services to the patients we serve by general knowledge, and enabling clinical decision



📆 20150330 Pathology Organization Chart.pdf

Department of Pathology is directed by Peter A. Dysert, II, M.D., (Ph: 214 820-3021).

The Administrative Director is Allen Stanton, MT(ASCP) Ph: 214 820-3188

Accreditation certifications The laboratories are located in the Caruth Laboratory Building at of Pathology also operates several satellite locations on the BUMC campus.





T CLIA 2014.pdf T CAP2013.pdf



T ASHI 2014.pdf

For 24 hour information, contact Laboratory Client Services at 214 820-3188.

To Contact Staff Pathologist, On Call: Laboratory Client Services 214 820-3188

To Contact Pathology Resident, On Call: Beeper number 214 992-8665

To contact the BUMC Laboratory via email, click on link below:

#### BUMC Department of Pathology

NOTE: Email submitted via the above link will be read only on Monday through Friday between 7 AM and 3 PM.

To search for laboratory test information, please select BUMC Pathology Handbook from the related links on the right side of this web page.

#### Laboratory-Pathology



#### Related Links

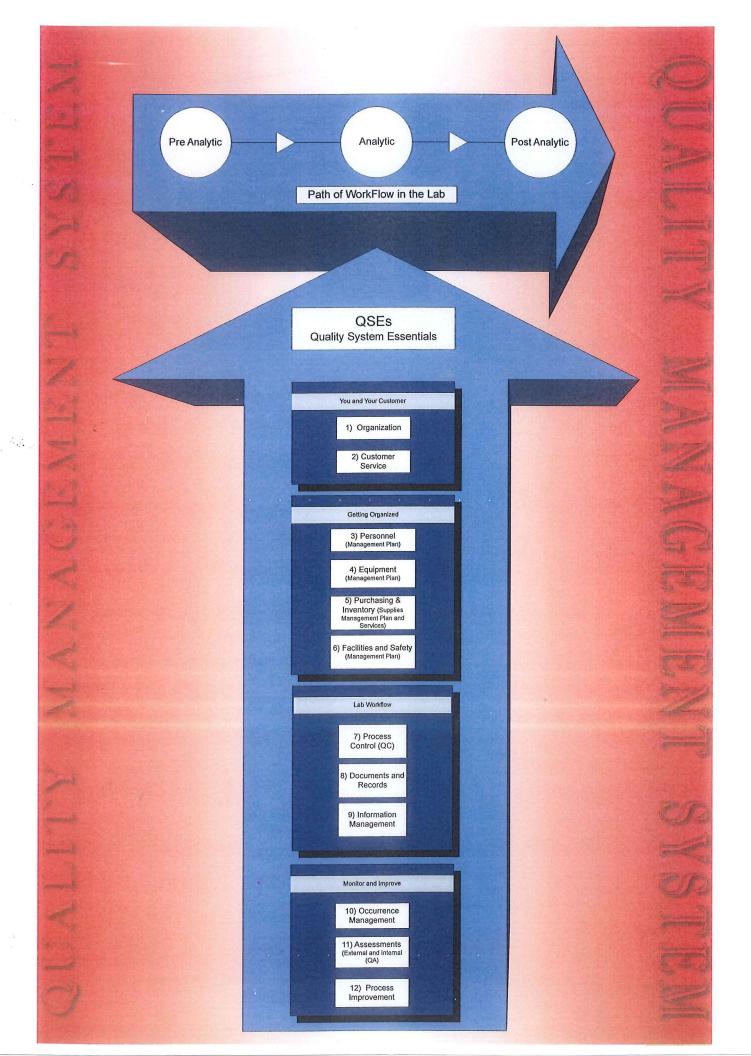
Pathology Handbook 4

med fusion 🖾

CAP 🖾

Contact information







## Service Etiquette Standards **AIDET**



# THE FIVE FUNDAMENTALS OF A CARING CONVERSATION

When we follow the rule of AIDET in our interactions with patients and their loved ones, we are practicing one of the most effective forms of communication. AIDET decreases the anxiety associated with the unknown and allows our patients to know that those taking care of them are skilled to do so.

hat is AIDET? It's a simple formula for communicating that all of us should learn and use. Remember the AIDET letters to make this one of your most important tools in delivering service.

**A** – **Acknowledge.** Anticipate your patient's needs. Knock before entering to show your respect. Greet them, smile and make eye contact. Make them feel welcome and appreciated.

**I – Introduce.** Tell them your name, your role and your department. Briefly tell them about your background and what makes you qualified to care for them. Expand the introduction to others on the team and to the physicians who will treat them. In this way, you are "managing up," setting the stage for your patient to have a smooth, anxiety-free transition from caregiver to caregiver.

**D** – **Duration.** Time is important to all of us. Tell your patient and family members how long they will need to wait. How long before the anticipated test, procedure, appointment or admission? How long will it actually take? How long before results are available? How long before they can go home? And if there are delays along the way, be sure to keep your patient/family informed of the additional waiting time.

**E – Explanation.** Use simple and understandable terms. Tell them what you are doing and why. What will happen and what should they expect? Ask if they have any questions about what you just explained. Gently encourage them to say in their own words what you explained. Remember, patients only remember 30 percent-50 percent of the information you give them, even when you use simple terms.

**T** – **Thank You.** Thank your patients for their cooperation, their communication and for allowing you to be their caregiver. Thank their family for their assistance and for being there to support the patient.

With consistent use of AIDET, you help to ensure that your patients leave with a good feeling about Baylor. Those good feelings translate into improved patient satisfaction and loyalty. Remember also that AIDET isn't just for clinical people. It applies to all Baylor employees. AIDET can be used in e-mails, voicemails, phone conversations, meetings and to answer call lights. Anytime effective communication is needed, AIDET applies.

By effectively communicating the AIDET components of Duration and Explanation with both patients and families, we can help to eliminate two significant patient dissatisfiers by reducing fear and anxiety and building confidence.

**Pictured:** Pictured: When AIDET becomes everyday communication, we increase our ability to deliver safe, timely, efficient, effective, equitable and patient-centered care (STEEEP™). Patient safety, quality and satisfaction are improved.



#### The Benefits of AIDET

By remembering to incorporate the five fundamentals of service in your interactions with patients and their families, here's what you can accomplish:

- You are telling your patient that their safety, care and comfort are important to you.
- You are "managing up" for your physicians and co-workers, paving the way for a smooth handoff between caregivers or departments
- You are providing needed information for the patient and the family, helping to lessen stress and anxiety during a difficult time.
- You are creating an atmosphere that encourages collaboration and coordination of care between you and other caregivers.
- You represent the Baylor experience to your patient and family members. Whatever they remember about their experiences will depend in large measure on how well you use these five fundamentals of AIDET.

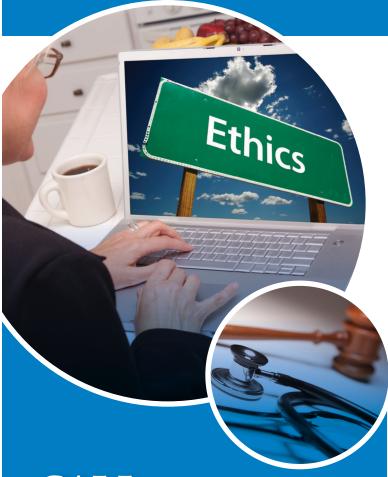


This laboratory is accredited by the College of American Pathologists.

If you have concerns regarding quality patient testing or laboratory employee safety that are not being addressed by your laboratory, please contact us. Your identity will be kept strictly confidential.

Call us on our dedicated lines: 866-236-7212 (US toll-free) 847-832-7533

### **Report Ethical Concerns**



CALL: **1-866-245-0815** 

GO ONLINE: http://ethicsline.baylorhealth.com

To be trusted as the best place to give and receive safe, quality, compassionate care, Baylor Health Care System must adhere to the highest ethical standards.

#### Your Ethical Obligations

- Comply with all laws and regulations
- Protect all patient information
- Conduct accurate billing
- Ensure our relationships with physicians and co-workers are consistent with our mission, vision, and values
- · Report concerns or suspicions of ethical violations

The BHCS Code of Ethical Conduct requires that all employees be accountable for their own ethical behavior and report concerns or suspicions about others. If you suspect or have seen a potential ethical violation, you have two ways to report it, both available 24/7:

- Call the Compliance EthicsLine: 1-866-245-0815
- File a report online: http://ethicsline.baylorhealth.com

No disciplinary action or retaliation will be taken against you when you report, in good faith, a perceived issue, problem, concern, or violation. And, your report can be made anonymously.

#### Accountability is everyone's job.

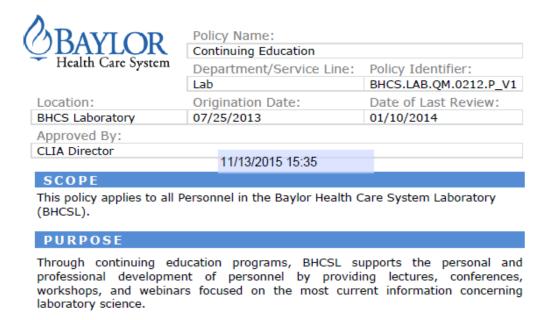
If you fail to report your concerns or suspicions, you may be contributing to a situation that could hurt patients and Baylor Health Care System.

For more information on the BHCS Code of Ethical Conduct, please see www.myBaylor.com.

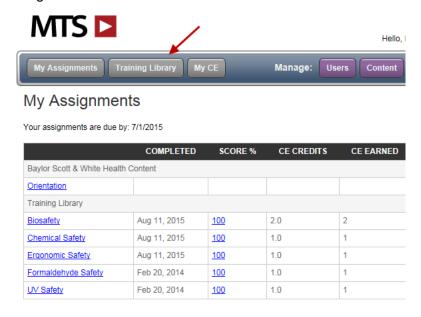


Ethics\_flyer\_8.5x11\_F7.indd 1 1/20/11 11:18:16 PM

The Department of Pathology offers many continuing education opportunities for staff to meet their Credential Maintenance Program requirements and the continuing education requirements of BSWH as defined in the system policy.



MTS – An email will be sent to you notifying you of assigned safety lessons. The email
has a link that takes you to MTS. Once there, click on the Training Library button to selfassign lessons for PACE credit.



- CAP surveys Continuing education activities are available through the College of American Pathologists.
- PACE Lectures are presented for PACE credit periodically.
- Teleconferences/Webinars are offered periodically.

#### Rehn, Mary C.

From: Rehn, Mary C.

**Sent:** Thursday, July 10, 2014 8:19 AM

**To:** Rehn, Mary C.

**Subject:** FW: BUMC Safety Training

----Original Message-----

From: donotreply@medtraining.org [mailto:donotreply@medtraining.org]

Sent: Thursday, July 10, 2014 8:18 AM

To: Rehn, Mary C.

Subject: BUMC Safety Training

MTS lessons are due by December 31, 2014.

Your password is change. You can change your password by clicking on your user id in the upper right corner after you login.

You need a score of 80% to pass. Click on any low score and then on the "Reset Score" link in the upper left corner. Retake the test.

BIS has broken my email account. Forward this email to yourself to make the link to MTS work.

Please click on the link below to begin:

Link to MTS

 $\frac{\text{https://urldefense.proofpoint.com/v1/url?u=http://medtraining.org/ltac3/Secure/Login.aspx?autologin%3D62784459\&k=eEbcMSXJ22m%2Bwpc%2B3zaDpA%3D%3D%0A&r=%2F7ai3uDyo6YoZhQohNfldzqj8ejnNZEOLPO3kNyV6Cg%3D%0A&m=S3nj8FPFq%2B5VMQbEi5XD3zV30NfwsQeldHE6iqW1cTc%3D%0A&s=528db0dec3720f82d301126157dc586816b30521b5258af650878dae00ab409c}$ 

If the link above does not work, you may sign in at

https://urldefense.proofpoint.com/v1/url?u=http://medtraining.org/ltac3/Secure/Login.aspx&k=eEbcMSXJ22m%2Bwpc%2B3zaDpA%3D%0A&r=%2F7ai3uDyo6YoZhQohNfldzqj8ejnNZEOLPO3kNyV6Cg%3D%0A&m=S3nj8FPFq%2B5VMQb

**CAP Surveys Educational Activities** 

<b>Program Code</b>	Title	Credits	Kit ID	Exp Date
CGL-C 2014	Quantitative D-dimer for Evaluation of Venous Thromboembolism	1.0 hour	26861667	11/16/15
UDS-C 2014	Mass Spectrometry in Clinical and Toxicology Laboratories	1.0 hour	26860938	11/2/15
J-C 2014	Therapeutic Apheresis	1.0 hour	27483287	11/9/15
C-C 2014	Diagnosis of Polycystic Ovary Syndrome (PCOS)	1.0 hour	27444738	11/23/15
S-C 2014	C-Reactive Protein	1.0 hour	26868249	2/2/16
C-C 2015	Clinical Goals for Quality Control Procedures	1.0 hour	27976939	5/3/16
FH9-C	12 Deficiency Megaloblastic Anemia	1.0 hour	27984560	10/25/16
CGL-C	Coagulation	1.0 hours	27986580	11/15/16

#### **How to Access Your Online Education Activities**

#### Create an account

The first time you want to access your CAP online education activities, you will need to create an account. Go to cap.org and select *Create an Account*. You will receive an email confirmation within 24 hours.

#### Access your account

- 1. Go to cap.org/learning and log in with your User ID and Password.
- 2. Under Browse Learning Catalog, select Launch.
- 3. Select the Learning Options tab. In the Search bar in the upper left, type in the product code mailing, and year (e.g., D-A 2012).
- 4. Choose the course name to get to the Course Details page.
- 5. In the upper right, select "Go".
- 6. On the Activity Details page, select *Register* and then *Submit* (located at the bottom of the page).
- 7. You will be prompted to enter the **kit ID** associated with the mailing and your institution's **CAP Number 2072001**.
- 8. Select Start then follow the instructions to complete the activity.
- 9. To claim credit, complete the end-of-course evaluation. Your certificate will then be available through your Training Transcript.

The courses may be viewed with the following browsers: Internet Explorer 6.x and higher (Windows XP), Firefox 2.x (Windows XP), Internet Explorer 7.x (Windows Vista) or Internet Explorer

8. X (Windows 7). **NOTE:** Pop-up blockers must be turned off. **IMPORTANT:** The CAP does not recommend using a MAC to view Education activities regardless of the browser version.

For assistance, please call a Customer Contact Center representative at 800-323-4040 or 847-832-7000 option 1.

#### **Review of Participant Summary (self-claiming education)**

Program Code	Credits	Kit ID
FH-A 2012	0.5 hours	24772756
CM-A 2012	0.25 hours	24768574
BMD-B 2012	0.5 hours	24765702
CM-B 2012	0.5 hours	25335351
FH9-C 2012	0.5 hours	24772888
FH9-A 2013	0.5 hours	25736386
CGL-A 2013	0.5 hours	25743560
CM-A 2013	0.25 hours	25734484
CM-B 2013	0.25 hours	26247806
FH9-A 2014	0.5 hours	26863011
ETME-A 2014	0.25 hours	27206757
CM-A 2014	0.25 hours	26858041
FH9-B 2014	0.5 hours	27446818
CM-B 2014	0.25 hours	26858334
BP-C 2014	0.5 hours	27489661
ETME-B	0.25 hours	26849244
FH9-A 2015	0.5 hours	27989830
CM-A 2015	0.25 hours	27986702
FH9-B 2015	0.5 hours	27984615
BP-B 2015	0.5 hours	28417574
CM-B	0.5 hours	28559884
BP-C	0.5 hours	28553992

#### **Self-Claiming Education**

A form to document self-claiming education is at the end of the Participant Summary. Retain the form for record-keeping and auditing purposes.

Individuals can track their participation by signing onto CAP and clicking on Training Transcript (left-hand side). Select Learning menu and choose Self-Reported Training. Select New, enter the required information and choose OK when complete.

# Department of Pathology Case Conference Series

October 27, 2015 12-1:00 p.m.

Core Lab Conference Room on the 3<sup>rd</sup> floor

#### **Credit:**

Baylor University Medical Center is approved as a provider of continuing education programs in the clinical laboratory sciences by the ASCLS P.A.C.E. Program. This program has been approved for 1.0 contact hours.

#### **Intended Audience:**

This series is intended for pathology staff and residents, laboratory personnel and support staff desiring updates in current laboratory topics.

#### Hematopathology cases with Dermal Manifestations

#### **Presented by:**

Rodrigo Soto, MD PGY4 Pathology Resident

**Description:** A case series of several dermatologic manifestations and associated hemato-pathologic entities. The presentation will include clinico-pathologic correlation, histopathology, differential diagnosis and work-up.

#### **Objectives:**

- Present clinical manifestations of skin involvement by hematologic disease.
- Examine histomorphology, diagnostic work-up and differential diagnosis.
- Review epidemiology, prognosis and treatment.

#### **Are These Elevated Testosterone Real? On the Measurement and Significance of Testosterone**

#### Presented by:

Daniel Grosser, MD PGY2 Pathology Resident

#### **Description:**

A case of clinician concern over the accuracy of testosterone measurements will be presented, followed by a review of basic physiology, measurement, and clinical significance of testosterone. Finally, the approach to resolving the clinician's concern will be presented.

#### **Objectives:**

- Review basic physiology of testosterone, including regulation, synthesis, and transport in blood.
- Review clinical significance of testosterone.
- Outline techniques for measuring testosterone and discuss our laboratory's approach.
- Illustrate an approach to addressing clinician concern over laboratory accuracy with an example of clinician concern over elevated testosterones.





11/11 @ 1200 Diabetes and the Cardiorenal Syndrome

11/12 @ 1100

Stay in Compliance with the CMS Directive Regarding PT on Multiple Instruments

11/18 @ 1100

Preparing for the Upcoming Respiratory Season: Diagnostic Testing Strategies for Influenza A, B and RSV

11/18 @ 1200

Laboratory Test Validation and Verification: The Current and Future Regulatory Status

11/19 @ 1400 - InspectionProof Information and Demonstration