

Task Evaluation Form

Universal
No. 003

Task title:

Daily Quality Assurance Measures

Description of Task:

Daily quality control procedures include observations and recording of the temperature levels of all refrigerators, freezers and instruments.

Infection Risks:

Door handles and other surfaces may be contaminated.

Engineering Controls:

None

Work Practice Controls:

- Employees wear gloves and if required by the section a fluid-resistant lab coat when touching contaminated surfaces in the laboratory, this includes refrigerator and freezer doors.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, HTL, Sr. HT, HT

Evaluation performed by:

Donna Briscoe, MT(ASCP)
Donna Briscoe, MT(ASCP)

Date:

5-20-19

Dept. Safety Committee Approval:

Mary [Signature]
Chairman, Safety Committee

Date:

3-13-19

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Task Evaluation Form

Universal
No. 004

Task title:

Decontamination of Work Area

Description of Task:

The task is performed whenever a spill or splash occurs, and at the beginning of each shift. The work area is decontaminated with a hospital approved disinfectant.

Infection Risks:

Contamination of skin or open wound from contaminated surfaces.

Engineering Controls:

None

Work Practice Controls:

- Wear gloves and fluid-resistant lab coats or aprons.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 005

Task title:

Telephone Usage in Lab Area

Description of Task:

Utilizing telephone to make or answer calls in lab area.

Infection Risks:

Handling telephone that has been contaminated with body fluids.

Engineering Controls:

None

Work Practice Controls:

- Employees wear gloves when using telephones.
- Decontaminate telephones with hospital-approved disinfectant.
- Do not handle "clean phones" while wearing gloves.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, HTL, Sr. HT, HT, Histology Assistant, Clinical Support Tech II

Evaluation performed by:

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Task Evaluation Form

Universal
No. 006

Task title:

Using Lab Computer Systems

Description of Task:

Computer keyboards are used for order entry, result entry and verification and information retrieval.

Infection Risks:

Gloved hands may become soiled with body fluids in work areas, causing contamination of computer keyboards when used.

Engineering Controls:

Use plastic keyboard covers if appropriate.

Work Practice Controls:

- Wear gloves when using a contaminated keyboard.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, HTL, Sr. HT, HT, Histology Assistant, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 007

Task title:

Recapping Vacutainer Tubes or Other Tubes

Description of Task:

Tubes are held individually, recapped with plastic caps and then placed in a rack for storage.

Infection Risks:

Possible spill or splash of serum or other body fluid

Engineering Controls:

Plastic caps that cover the rim of the tubes are used to protect employees from tube breakage and splattering.

Work Practice Controls:

- Employees wear gloves and long-sleeved, water-resistant gown or plastic apron.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, QA Tech, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 008

Task title:

Centrifugation

Description of Task:

Placement of tube of blood or other body fluid into a centrifuge and removal of same.

Infection Risks:

- Employee may become contaminated by:
- Contamination from outside of container
 - Breakage of container
 - Improper capping, resulting in spillage
 - Trying to forcibly remove samples stuck in centrifuge

Engineering Controls:

Centrifuges have self-locking lid.

Work Practice Controls:

- Employees wear gloves and plastic apron and/or lab coat.
- Centrifuges are decontaminated weekly, or when there is a spill or obvious contamination.
- Remove extra labels from tubes to prevent samples from becoming stuck in centrifuge.
- Call Biomedical Technology Services when tubes are stuck in the centrifuge.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 010

Task title:

Aliquoting Specimens

Description of Task:

Transfer of specimen to another container for storage or for testing. (e.g. samples into centrifuge tubes for extraction, reaction or sample cups for analyzers).

Infection Risks:

Employee or countertop may be contaminated by:

- Splashing of specimens during transfer, contaminating countertop or employee
- Dropping specimen and breaking container, causing spill
- Contamination from outside of container

Engineering Controls:

- A plastic shield maybe used.
- Use plastic disposable pipettes to prevent accidental puncturing of gloves.
- Place biohazard trash bin for disposables next to workstation.

Work Practice Controls:

- Employees wear gloves and plastic apron and/or lab coat.
- Decontaminate countertops each shift and after an obvious spill.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech

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Task Evaluation Form

Universal
No. 012

Task title:

Transport of Specimens

Description of Task:

Transport of patient specimens.

Infection Risks:

Possible dropping of specimens, resulting in breakage and contamination of employees, floors, etc.

Engineering Controls:

Double containment carriers are used.

Work Practice Controls:

- Employees wear gloves and lab coats or aprons while transporting specimens.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, Sr. Phleb, Phleb I Phleb II

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Task Evaluation Form

Universal
No. 014

Task title:

Storage of Specimens

Description of Task:

Samples removed from each analyzer or work area are placed in a sample rack or container for storage. The rack or container is transported to storage.

Infection Risks:

- Vacutainers and other tubes may be contaminated.
- Possible dropping of specimens resulting in breakage of containers, contaminating employees, floors, etc.

Engineering Controls:

- Use plastic containers to double contain and transport specimens.
- Use carts for large numbers of samples.

Work Practice Controls:

- Employees wear gloves and lab coats or aprons when filing and transporting specimens.
- Wash hands after glove removal.

Job titles of employees performing task:

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Task Evaluation Form

Universal
No. 017

Task title:

Phlebotomy - Venipuncture (Vacutainer)

Description of Task:

Appropriate identification procedures are executed. A non-latex tourniquet is placed on the patient's arm above the forearm. An appropriate vein is selected and the site area is cleansed with alcohol prep. A multi-sample needle is placed on a needle holder and the skin and the vein are penetrated. Appropriate vacutainer tubes are then placed on the needle holder until all blood samples have been drawn. The tourniquet is removed, the needle holder is then withdrawn and a protective dressing is placed over the puncture wound.

Infection Risks:

- Needle sticks either from handling the vacutainer needle or from needles left in the room
- Contamination of skin from broken or contaminated vacutainers
- Infection from airborne diseases such as TB
- Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids

Engineering Controls:

- After withdrawing the multi-sample needle, the phlebotomist activates the sheath to cover the needle with their thumb while pointing the needle away from themselves and the patient.
- Special disposal bins for sharps are in each patient's room.
- Biohazard bags are used to transport blood samples from the patient's room back to the laboratory.
- Hand washing sinks and alcohol-based foam are available in each patient's room.

Work Practice Controls:

- Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between patients.
- Replace lab coats if soiled.
- Wash hands after glove removal in the patient's room.
- Handle vacutainer tubes only if wearing gloves.
- Transport vacutainers in biohazard bags.
- Use vacutainer needle holders only once.
- Needle disposal bins in the patient's room are emptied when 75% full.
- Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

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Carol Hataway, MT(ASCP)

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Task Evaluation Form

Universal
No. 018

Task title:

Phlebotomy - Venipuncture (Syringe technique)

Description of Task:

Appropriate identification procedures are executed. A non-latex tourniquet is placed on the patient's arm above the forearm. An appropriate vein is selected and the site area is cleansed with an alcohol prep. A hypodermic needle or a winged infusion set is placed on the syringe and the skin and the vein are penetrated. Blood is withdrawn using the syringe plunger until an adequate quantity of blood has been obtained. The blood is dispensed into the appropriate tubes utilizing a safety transfer device. The tourniquet is removed and a protective dressing is placed over the puncture wound.

Infection Risks:

- Needle sticks either from handling the syringe or from needles left in the room
- Contamination of skin from incorrect use of the syringe
- Contamination of skin while dispensing aliquots of blood from syringe
- Contamination of skin from broken or contaminated vacutainers
- Infection from airborne diseases such as TB
- Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids

Engineering Controls:

- After withdrawing the hypodermic needle or the winged infusion set, the phlebotomist activates the sheath to cover the needle with their thumb while pointing the needle away from themselves and the patient.
- Use a transfer device to dispense the blood into the appropriate tubes.
- Special disposal bins for sharps are in each patient's room.
- Phlebotomy trays with racks are used to transport blood samples from the patient's room back to the laboratory.
- Hand washing sinks and alcohol-based foam are available in each patient's room.

Work Practice Controls:

- Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between patients.
- Replace lab coats if soiled.
- Wash hands after glove removal in the patient's room.
- Handle vacutainer tubes only if wearing gloves.
- Transport vacutainers in biohazard bags.
- Use vacutainer needle holders only once.
- Needle disposal bins in the patient's room are emptied when 75% full.
- Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

Evaluation performed by: _____

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Carol Hataway, MT(ASCP)

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Task Evaluation Form

Universal
No. 019

Task title:

Heelstick/Fingerstick

Description of Task:

Appropriate identification procedures are executed. An appropriate site is selected and the site (heel, fingertip) is cleansed with alcohol prep. An appropriate fingerstick device or a heelstick device is placed on the site and released to penetrate the skin. The first drop of blood is wiped away with a 2 X 2 gauze. Subsequent drops are collected until all blood samples have been drawn. The lancet is discarded in an approved container in the patient's room. Pressure is held on puncture site until bleeding has stopped.

Infection Risks:

- Needle stick from handling the lancet or from needles left in the room
- Infection from airborne diseases, such as TB
- Contamination of skin while dispensing blood into appropriate tube or wiping first drop of blood
- Contamination of skin from broken or contaminated vacutainers
- Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids

Engineering Controls:

- After penetrating the skin, the blade retracts into the plastic case and cannot be reused.
- Phlebotomy trays with racks are used to transport blood samples from the patient's room back to the laboratory
- Special disposal bins for sharps are in each patient's room.
- Hand washing sinks and alcohol-based foam are available in each patient's room

Work Practice Controls:

- Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between patients.
- Replace lab coats if soiled.
- Wash hands after glove removal in the patient's room.
- Handle vacutainer tubes only if wearing gloves.
- Transport vacutainers in biohazard bags.
- Needle disposal bins in the patient's room are emptied when 75% full.
- Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions..

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 020

Task title:

Phlebotomy - venipuncture (Butterfly)

Description of Task:

Appropriate identification procedures are executed. A non-latex tourniquet is placed on the patient's arm above the forearm. An appropriate vein is selected and the site area is cleansed with alcohol prep. A winged infusion set (Butterfly) is attached to a syringe or to an access device and the skin and the vein are penetrated. Appropriate blood is drawn and dispensed into the appropriate tubes. The tourniquet is removed, the winged infusion set is then withdrawn and a protective dressing is placed over the puncture wound.

Infection Risks:

- Needle sticks either from handling the vacutainer needle or from needles left in the room
- Contamination of skin from broken or contaminated vacutainers
- Infection from airborne diseases such as TB
- Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids

Engineering Controls:

- After withdrawing the winged infusion set, the phlebotomist activates the sheath to cover the needle with their thumb while pointing the needle away from themselves and the patient.
- Use a transfer device to dispense the blood into the appropriate tubes via the butterfly.
- Special disposal bins for sharps are in each patient's room.
- Use phlebotomy trays with racks to transport blood samples from the patient's room back to the laboratory.
- Hand washing sinks and alcohol-based foam are available in each patient's room.

Work Practice Controls:

- Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between patients.
- Replace lab coats if soiled.
- Wash hands after glove removal in the patient's room.
- Handle vacutainer tubes only if wearing gloves.
- Transport vacutainers in biohazard bags.
- Use vacutainer needle holders only once.
- Needle disposal bins in the patient's room are emptied when 75% full.
- Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 021

Task title:

Removing Caps from Tubes

Description of Task:

The stoppers are removed from the vacutainer tubes.

Infection Risks:

- The outside of the vacutainer tube maybe contaminated
- The tube could be dropped or knocked over spilling serum or plasma
- Serum or plasma can be aerosolized when the stopper is removed

Engineering Controls:

- Face shield or
- Goggles and mask or
- Safety splash shield or
- Cover the stopper with a plastic backed biohazard wipe

Work Practice Controls:

- Wear gloves and lab coats or aprons while performing task.
- Decontaminate countertops each shift and after an obvious spill.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech

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Task Evaluation Form

Universal
No. 022

Task title:

Cleanup of Biohazardous Spill

Description of Task:

Small Spill – Pick up any broken glass and discard in a broken glass container or a puncture-resistant sharps container. Wipe up blood or body fluid with paper towels. Disinfect area with a hospital-approved disinfectant.
Large Spill – Surround the area of the spill with absorbent paper towels to prevent spreading. Pick up any broken glass and discard in a broken glass container or a puncture-resistant sharps container. Wipe up blood or body fluid with paper towels. Disinfect area with a hospital-approved disinfectant.

Infection Risks:

- The employee may cut himself with broken glass
- Surfaces and the towels used for cleanup are contaminated with body fluids or blood

Engineering Controls:

- Use mechanical devices (hemostat and/or two pieces of cardboard) to pick up sharps and broken glass.
- Use puncture-resistant containers for disposal.
- Biohazard trash bin for disposables are available.

Work Practice Controls:

- Employees wear gloves and water-resistant lab coats or aprons.
- Disinfect all surfaces contaminated by the spill using the hospital-approved disinfectant.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, QA Tech, HTL, Sr. HT, HT, Clinical Support Tech II

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Task Evaluation Form

Universal
No. 023

Task title:

Pneumatic Tube System

Description of Task:

Placement or removal of biological specimens into the pneumatic tube system. All users must have documented training before using the tube system.

Infection Risks:

- Improperly closed container may leak or break.
- Breakage in the system can cause massive contamination to the system.

Engineering Controls:

- Use carriers that lock and are not cracked or broken.
- The clasp lock must be working properly.
- Close the carriers tightly before shipping.
- Laboratory carriers bear a biohazard label and are not used to ship pharmacy products.
- Specimens must be double contained, sealed to prevent leakage and include an absorbent pad in the package.

Work Practice Controls:

- Wear gloves and lab coats or aprons while performing task.
- Decontaminate countertops each shift and after an obvious spill.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Clinical Support Tech II, QA Tech, Sr. Phleb, Phleb I, Phleb II, HTL, Sr. HT, HT

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Task Evaluation Form

Universal
No. 024

Task title:

Routine Maintenance on Centrifuges

Description of Task:

Cleaning inside of centrifuges with a disinfectant solution.

Infection Risks:

- Possible contamination from any body fluid
- Possible puncture of gloves by broken glass in centrifuge

Engineering Controls:

None

Work Practice Controls:

- Wear gloves and lab coats or aprons while performing task.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech,

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Date:

3-13-19

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Task Evaluation Form

Universal
No. 025

Task title:

Dumbwaiter Usage

Description of Task:

The dumbwaiter is utilized to transport specimens within the laboratory system. Specimens are placed on trays or in racks in the dumbwaiter and sent to specific laboratory areas.

Infection Risks:

The specimens, racks trays or the dumbwaiter can contaminate employees.

Engineering Controls:

None

Work Practice Controls:

- Wear gloves and lab coats or aprons while performing task.
- Decontaminate dumbwaiter and containers daily and after an obvious spill.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, HTL, Sr. HT, HT

Evaluation performed by:

Donna Briscoe MT(ASCP)
Donna Briscoe, MT(ASCP)

Date:

5-20-19

Dept. Safety Committee Approval:

Mary Ph
Chairman, Safety Committee

Date:

3-13-19

Approved 12/10/03, Revised 09/08/04, 10/13/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19

Task Evaluation Form

Universal
No. 026

Task title:

Copiers

Description of Task:

Copiers are used in the work areas so as not to contaminate copiers in office areas. A paper towel is used to apply the hospital approved disinfectant to the outside surfaces of the copier. This is wiped off with a dry towel.

Infection Risks:

Employees can be contaminated by touching surfaces that have come in contact with dirty gloves.

Engineering Controls:

None

Work Practice Controls:

- Employees wear gloves and plastic aprons or a lab coat.
- Decontaminate the outside surfaces of the copier daily.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II

Evaluation performed by:

Donna Briscoe MT(ASCP)
Donna Briscoe, MT(ASCP)

Date:

5-20-19

Dept. Safety Committee Approval:

Mary Loh
Chairman, Safety Committee

Date:

3-13-19

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Task Evaluation Form

Universal
No. 027

Task title:

Specimen Refrigerator and Freezer Cleaning

Description of Task:

Refrigerators and freezers are used for storing specimens at appropriate temperatures. These should be cleaned at prescribed intervals and when spills occur.

Infection Risks:

Employees can be contaminated from spills or parts of the refrigerator or freezer

Engineering Controls:

None

Work Practice Controls:

- Employees wear gloves and plastic aprons or a lab coat.
- Wash hands after glove removal.

Job titles of employees performing task:

Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II

Evaluation performed by:

Donna Briscoe MT(ASCP)
Donna Briscoe, MT(ASCP)

Date:

5-20-19

Dept. Safety Committee Approval:

May Ph
Chairman, Safety Committee

Date:

3-13-19

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Task Evaluation Form

Universal
No. 029

Task title:

Discarding Patient Samples

Description of Task:

At the end of the required retention period, patient samples are disposed of in biohazardous trash.

Infection Risks:

- The outside of the tubes may be contaminated with blood
- Tubes may be dropped and broken and result in splatter of blood on employee and cuts from broken glass
- Stoppers/parafilm may come off and result in spills.

Engineering Controls:

- Samples are transported from the storage refrigerator to the trash in secondary containers (racks)
- Samples are sealed inside a plastic bag before discard in biohazardous waste containers.

Work Practice Controls:

- Wear gloves when handling patient samples
- Wash hands after removal of gloves

Job titles of employees performing task:

Manager, Chief Tech, Supervisor, Sr. Med Tech, QA Specialist, Blood Bank Specialist, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, Referral Coordinator

Evaluation performed by: Donna Briscoe MT(ASCP) Date: 5-20-19
Donna Briscoe, MT(ASCP)

Dept. Safety Committee Approval: Mary Ph Date: 3-13-19
Chairman, Safety Committee

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