# **Microbiology Council Minutes**

Thursday, January 9th, 2014, 7:30 pm

Review and sign-off of the minutes is mandatory for all Micro staff prior to next meeting.

Deadline 2-27-2014

**Attendees** 

Facilitator: Jerry Claridge Note taker: Michael Majors

Present: Jennifer Baldwin Bonney, Krystal Colwill, Sydney Henderson, Cassi Miller, Shannon Sabins, Tony

Vang

Excused: Tiesha McCain

# **Review / Approval of Previous Minutes**

Minutes were approved. No corrections or edits were submitted.

#### Reflection

The reflection was provided by Cassi.

#### **Old Business**

# Media Stocking in the Micro Specimen Processing Area

No update.

#### **New Employee Training**

Based on the Employee Survey from last year, the microbiology department determined an action item would be employee training. Micro Council has been working on this action item for several months with input from staff to develop checklists for each area. Jen reported that the checklist for the Urine culture bench is complete and she is still working on other areas.

Action items Person responsible Deadline

✓ Continue training checklist/schedule development for other areas. Jen 2/27/2014

#### Stool Specimens with Insufficient Material for O&P Testing

Jerry reported that a comment has been developed for use when we encounter specimens that yield a suboptimal amount of sediment after centrifugation.

Action items Person responsible Deadline

✓ Jerry will ask Jan to build the comment and notify the department. Jerry/Jan 1/9/2014

#### **CRM Log**

The CRM Log continues to be an issue. People on 2<sup>nd</sup> shift are struggling to sort through the pending lists because CRM items are still not getting put on the log. The tech that discovers a pending list issue is the person responsible for putting the item on the CRM log, with their initials. Techs should not be leaving their list on the CRM desk. When placing items on the list, techs need to be specific on what needs to happen with that specimen, duplicate - credit, etc.

#### **PAML Specimens**

PAML has requested that all specimens from PAML clients be returned to PAML rather than being discarded at PSHMC. Cassi reported that she selected bins to order for segregating specimens. The bins have not been received. Nate has been sorting and sending daily shipments of 'ready to toss' samples to PAML. No one was sure if all of the necessary specimens were being sent.

Action items

✓ Follow up on the status of PAML specimen return.

Person responsible Deadline
2/27/14

**Blood Culture Procedure – Pending Item from Previous Meeting** 

A request was made to update the Blood Culture Procedure to provide additional guidance for organisms that may be either contaminants or opportunistic pathogens (i.e., when and how to report AST results). Some of this information already exists, but a few details are lacking.

#### **Action items**

Make necessary modifications to the procedure.

# Person responsible Deadline

Michael 2/27/2014

#### **EPIC Update**

Things seem to be going better. We still encounter issues with orders from the ICU and OR, but we are seeing fewer mistakes.

#### **Reminder: Reset Urines**

When a urine culture is reset from the original specimen, remember to enter "Reset" into the SREQ section to communicate that fact to the person reading the culture.

# Reminder: Leaving Early on 1st Shift

Everyone is required to go through the helper list and to check with the supervisor/lead/charge tech before leaving early. Everyone is also responsible for restocking the supplies and cleaning their bench before leaving. A cleaning/stocking checklist will be added to the helper list.

#### **Reminder: Saving CRCF Specimens**

Please remember to save CRCF specimens in the refrigerator. Sometimes we need to set up additional plates on these specimens.

## **New Business**

#### **Staffing Update**

Mandy Esco was hired for the supplemental position and is currently training on day shift. Sarah Anderson has been hired for the FT 2<sup>nd</sup> shift position and will begin training 1/27.

Jerry indicated that each position will be assigned a number on the schedule to help keep track of vacant and filled positions. This should show up on the next schedule.

#### **CAP Inspection**

We are due for a CAP inspection in 2014. The window for inspection is March - May. Jerry, Michael, and Jason will be reviewing the newest CAP checklists for any items that need to be addressed. An answer key to all of our checklist items will be distributed to all for review.

Action itemsPerson responsibleDeadline✓ Review CAP checklists.JC/JA/MM2/27/14

✓ Update answer key and distribute to the Micro department
MM
2/27/14

#### **Employee Survey Action Plans**

Jerry held meetings on all three shifts to review the results from the employee survey last year. As a result of those meetings, an action plan will be created for 2014. Jerry will post the results of the Employee Survey for all to review. If you have any questions, please see Jerry.

#### Critical / Alert Value Call Back Code

PAML has requested standardization for calling critical values to clients. Jerry is working on a protocol for using Sunquest to put results into a queue for PAML Client Services to call. We will be using this new protocol for all critical and alert values. We will need to supply the phone number for Client Services. Jerry will notify the department when the new protocol is ready for use.

Update: Jennifer BB has written a procedure for how we will handle critical/alert values on PAML patients. This will be distributed soon.

Action itemsPerson responsibleDeadline✓ Develop and distribute protocol for Call BacksJerry1/21/14

#### **Urologist Phone Numbers**

A request was submitted to place a list of phone numbers on the benches for the urologists that want extended urine culture workup.

#### **Action items**

✓ Post phone numbers on benches.

# Person responsible Deadline

Shannon 2/27/2014

# 3<sup>rd</sup> Shift Low Census

Authorization of Low Census requests by third shift employees should be made by a representative from the third shift.

#### Disposal of Specimens When Swabs are Not Replaced into the Container

Question: For testing that requires the use of the entire swab, why do we keep the empty containers with the other swabs (e.g., MRSPCR, CGEN, CBSBS)? It just adds to the number of swabs to sort through when we need to retrieve specimens.

Discussion: Nobody could provide a reason to save the empty containers. They should be disposed of in the tall biohazard buckets and not saved with other specimens.

#### **HIVLD Testing**

Our HIVLD test is only available to labor & delivery patients and for employee exposure testing. Unfortunately, the HIVLD test was not mapped properly in EPIC and we are receiving samples for HIV testing that should be going to PAML. If you receive a sample that is obviously not L&D or an employee, do not perform the rapid HIV test. The sample should go to Specimen Processing for resolution. Please notify Jerry for all cases.

# **Processing Organism ID Samples**

Question: Slants received on 3<sup>rd</sup> shift do not always get fully processed. People sub to BAP and CHOC and make a GS. The GS may not get read until 1<sup>st</sup> shift and then someone has to backtrack to figure out what has or hasn't been set up. Would it be more efficient if the slants received on 3<sup>rd</sup> shift were left for 1<sup>st</sup> shift to handle?

Discussion: Yes, unless 3<sup>rd</sup> shift has time available. Smears should be read <u>before</u> plates are selected for subculture. Remember to tape plates when the smear shows GNRs.

#### Send out Log

The send out log will be updated with a space to document where the isolate is being sent. Please fill out all of the required information on the Send Out Log.

#### **Action items**

✓ Update Send out Log

# Person responsible Deadline

Michael 2/27/2014

#### **CGEN and CYEST Orders on the Same Vaginal Sample**

Question: When we receive a vaginal swab with both CGEN and CYEST orders, should we cancel the CYEST since we report yeast under the CGEN?

Answer from Jerry: No, we do not have the authority to cancel tests. There are some clients that intentionally request both tests.

Group discussion: Since there are smears for both tests, we should put both labels on one smear. Gram stain readers must be sure to enter results under both accession numbers.

#### CWD, CFL, and CTIS

Question: Would it be possible to combine these 3 tests into one test? We handle a lot of tests that are incorrectly ordered and it generates additional work to verify and correct orders.

Discussion: This question is beyond what can be discussed during the Micro Council Meeting. Jerry will take a closer look at the details surrounding the question. There may be some billing details that preclude combining the tests.

#### **Training New People & Developing Proficiency**

A request was made to ensure that any staff responsible for training has sufficient experience before they train others. Newly-trained people also need to work in that area for several consecutive days so develop proficiency in that area. Jerry will discuss with Jason. Sometimes it's challenging to schedule and accommodate training.

## Safety

Cell phones are still being used inappropriately in the lab. Cell phones should never be accessed or touched intermittently while working in the lab. They should never be carried in your lab coat pocket. That is a dirty area! Always wash your hands before touching personal items. Anyone caught using their cell phone inappropriately in the lab will be subject to disciplinary action.

## **R&D** and Technical Updates

The reflex testing for blood cultures using the BioFire blood culture ID panel was supposed to go live 12/17, but seems to be stalled with LIS. We will update you when we know more. A procedure for the test will be circulated soon. The technical aspects are similar to the respiratory panel.

The reflex testing for negative rapid strep testing is also still pending.

Michael has finished an extensive media study to determine a more optimal medium to use for throat culture GAS screens. We will be converting to the new medium within the next few weeks. A new procedure will be available soon.

We are still culturing tissue from positive CLO tests to recover *H. pylori* isolates. Our goal is to use these isolates for susceptibility testing in order to generate data for an antibiogram reference for clinicians. Thank you for helping recover these isolates!

#### Kudos

• Thank you to Sydney for joining us for the past 1½ years. We've enjoyed working with you and wish you a safe journey back to Colorado. Good luck with your future endeavors!

The next Micro Council Meeting will be held February 27<sup>th</sup> at 19:30 Reflection to be provided by Shannon