

Laboratory Staff Meeting

Location: Laboratory – Core Laboratory

12 August 2015, 11:15 – 11:45



1. Fluid Kits for the Floors
 - a. We have had fluid kits in the past and issues arose with the tubes expiring.
 - b. We will work on collection instructions for these samples post-completion of the 5600 and Clinitek Go-Live
 - c. These will be Hospital Wide documents and as such will need to be approved through Policies and Procedures Committee
2. Blood Gases Collection Kits
 - a. Connie put together these kits
 - b. Kits are available on the shelf by the door (above the fridge)
3. AcT Maintenance – remember to push start-up after running QC (clean the blood out of the system)
 - a. Suggestion was made to add two items to the Maintenance sheets for the AcT
 - i. Bleach the Vacuum Isolator Chamber every 3 months – when the QC is changed
 - ii. Change the Vacuum Isolator Chamber every 6 months – with SCAL
4. Eye Protection – please be sure to wear the eye protection provided whenever there is a possibility of a splash
 - a. Recent incident in the lab – staff member used the eye wash appropriately and followed the appropriate steps post-incident
 - b. It is ALWAYS better to prevent the incident from happening in the first place
5. Emergency Shower Curtain is now installed. In the event this is needed, pull on the curtain and the tie will release. This will provide privacy for the staff member that requires it and protect the electrical equipment from damage.
6. 5600 went live this morning with an abbreviated test menu. (ECI testing – with the exception of infectious, plus Vancomycin)
 - a. Please ensure that there is a tube for each label generated by the LIS. This could be a pour off or separate collection tube.
 - b. For Vancomycin tests please ensure the dosage information is appropriately completed. These fields will print on the final report. Vancomycin is to be collected in red top tubes, centrifuged and poured off. Ensure the aliquot label is on the pour off tube being sent for testing as this is the barcode the instrument can read.
 - c. Carolyn will send out a memo re: the collection of 2 tubes (minty green and SST) for inhouse testing that is reflective of our current status.
 - d. There has been a delay with the Syphilis validation. Experiments involving the vendor and DynaLife are ongoing.
 - e. We are expecting a staged Go-Live with the 5600 over the next few weeks.
 - f. Jennifer wanted to thank April, Theresa and Carolyn for their assistance with the 5600 implementation (Thanks to you too Jen!). Thanks as well to all of those that have worked extra hard on the bench to allow others to work on this project.

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Round Table:

Elwood – Will the Lab Requisition be updated for new tubes?

The LAC approved Lab Requisition DRAFT has been sent to WOLF to be trialled for 3 months. Once we have some feedback from the users we will make any final changes then send it to Forms Committee.

Theresa – Input for changes – Could we also have an opportunity via SoftComm to provide input so those not able to attend meetings also get an opportunity to participate?

For ongoing issues, could staff have one-on-one instruction as sometimes individuals do not realize they are the ones making the errors. Staff should be open to feedback as the end goal is to improve the process, not be punitive.

Connie – Clarifying how dosage information is entered and where the data goes?

The tests will be transferred to the SDOSE template as we go live with them on the 5600. These fields will be visible on the final report.

The Dose Regimen/Route: Frequency, dosage and method of delivery – you may need to use the comment field

Last Dose Started: Date and Time

Last Dose Ended: Date and Time

How Long on this Regimen: Time since treatment started

The other template is for the referred out therapeutic drugs. They will print on the manifest but not on the report generated by the referral laboratory.

Jennifer – RFP for referral laboratory goes out next month.

ABL Update – Until test script documentation is complete, status quo

Sherri – When a workplace injury happens after hours, there seems to be confusion on what steps to take, could we have a Job Aid.

Carolyn will work on one with Karen Pardy and Lab Staff.

Joel – Reports having issues with not all of the fields of the Microbiology requisition being completed. Staff to ask at time of collection if requisition has not been completed. Staff reminded to follow the Specimen Acceptance Rejection Policy. Indicate on the report the missing fields (no antibiotic history given, etc.) if the sample is acceptable but not all information was provided. Carolyn to communicate with Doctors about requisitions.