Microbiology Meeting Minutes June 22/16 at 13:00

Present: Moses, Solomon, David, Laura G, Joel, Laura S and Sarah

1. Frozen isolates:

When going through the frozen patient specimens a few things were noticed:

* Organism name was not written on all the tubes. Each tube has to have the organism name written on it.
* Not all tubes were in the log book. Make sure you record each patient specimen in the log book.
* Not all tubes were in the correct order. Place tube in next available position so they match up with the log book.
* Multiple organisms on same patient were frozen. Only need to freeze one organism per patient.

1. TB requisitioning will be done by specimen receiving person. Also, if 12-8 shift has to do TB and there are send outs, ask another tech to do your send outs for you so that you can have TB done by 5 when everyone else leaves. These are ways we can help to reduce overtime.
2. CMPT preliminary results are back. We missed the Yersinia in the stool culture. I resubbed the stool sample and it did grow at RT on the CIN plate. Everyone had a chance to see it. Hopefully this will make us recognize it if we get it again.
3. BD is coming on the 27/28 of June to do PM on Bactec and MGIT. We do not need to empty the analyzers for the visit. Will have to get maintenance to help move the MGIT out from the wall.
4. Make sure to review and initial the communication binder. All emails and important information will be kept in there.
5. Reporting to OCPHO- still follow Jennifer’s draft procedure and call positive MGIT results. If you have difficulty getting ahold of anyone, make sure you document every call and message you made/left.
6. Making 2 slides – it was decided that the second slide was only being used rarely. Therefore, a second slide will only be made on deep wounds, as the swab goes into the Thio and another slide cannot be remade.
7. Multiple swabs from same patient – if the same patient has multiple swabs all growing the same organism, susceptibility testing does not need to be done on each specimen. The first one can be done and then the others referred to it.
8. Acridine Orange – The validation is complete and approved. We can now use the large bottle of stain. Our other order of the individual stains is still coming in and we will use that as well. Then we will switch to the single, larger bottle.
9. Cipro validation – we have started this validation. Needs to be done every day for 30 days, including weekends. We decided it will be best to make a purity plate of your organisms and then use that the next day to set up your KB.
10. Referred out specimens – Joel indicated he would like to sit with everyone individually to go over the process for send outs and getting results back. He will start meeting with everyone today.
11. MRSA screens – it was decided we will set up MRSA screens at 12 and 5 in batches. This makes reading of the plates the next day easier.