PROGRAM Standard Operating Procedure – Laboratory Services			
Title: MIC10400 -	Policy Number: 15-145-V1		
Accessioning CMPT Surveys			
Program Name: Laboratory Services			
Applicable Domain: Lab, DI and Pharmacy Services			
Additional Domain(s): NA			
Effective Date: 14/03/2024	Next Review Date: 14/03/2026		
Issuing Authority:	Date Approved:		
Director, Laboratory and Diagnostic Imaging Services	14/03/2024		
Accreditation Canada Applicable Standard: NA			

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GUIDING PRINCIPLE:

CMPT surveys provide external assessment challenges (EQA) for clinical microbiology laboratories. The program covers a wide variety of samples normally received by laboratories for staining, bacteriology culture and identification.

The Stanton Territorial Hospital Microbiology Laboratory participates in the following CMPT external assessment challenges:

- 1. Clinical Bacteriology program
- 2. *C.difficile* program
- 3. AFB (Acid-Fast bacilli) stain program
- 4. Screens/Molecular program
- 5. COVID-19 program
- 6. *Trichomonas vaginalis* detection program

PURPOSE/RATIONALE:

This standard operating procedure describes how to accession CMPT surveys in a standardized way so that results do not affect epidemiology statistics and so that patient specific system rules are applied correctly.

SCOPE/APPLICABILITY:

This standard operating procedure applies to Medical Laboratory Technologists (MLTs) processing competency survey specimens.

SAMPLE INFORMATION:

- Testing material consists of lyophilized cultures, slides and "simulated" patient specimens.
- Refer to the directions accompanying each survey for specimen handling.

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SPECIAL SAFETY PRECAUTIONS:

Containment Level 2 facilities, equipment, and operational practices for work involving infectious or potentially infectious materials or cultures:

- Ensure that appropriate hand hygiene practices be used
- Lab gown must be worn when performing activities with potential pathogens
- Gloves must be worn when direct skin contact with infected materials is unavoidable
- Eye protection must be used when there is a known or potential risk of exposure of splashes
- All procedures that may produce aerosols, or involve high concentrations or large volumes should be conducted in a biological safety cabinet (BSC)
- The use of needles, syringes and other sharp objects should be strictly limited

All patient specimens are assumed to be potentially infectious. Routine Practices must be followed. Since viable micro-organisms are used, all cultures must be handled with appropriate precautions. All equipment in contact with cultures should be decontaminated by appropriate methods.

PROCEDURE INSTRUCTIONS:

Step	Action				
Ordering CMPT samples in SoftMic					
1	In Order Entry, select "New" to create a new patient				
2	Fill out the following information in the general tab:				
	LAST NAME: CMPT				
	FIRST NAME: CMPT Specimen No.				
	AGE: As specified on CMPT Case History Sheet				
	SEX: As specified on CMPT Case History Sheet				
	ATTENDING DR.: DUMD				
	WARD: CMPT NOTE: The ward must be CMPT in order to exclude data from epidemiology reports				
	DEPOT: S1				

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	Fill out the following information in the micro tab:				
3	unk Image: Comparison Micro OE Commander CLINICAL HISTORY: 22 year old female student with recurrent phayngitis Study CMPT Image: Culture Comm Specimen Quality Order Comm ORDER: Order the test specified on the CMPT Case History Sheet				
	SOURCE: Choose the appropriate source as per the CMPT Case History Sheet				
SITE: Free text the site information provided on the CMPT Case His Sheet					
	COLLECTED/RECEIVED/PLATED: Add yourself				
	ANTIBIOTIC THERAPY: Fill out as per the CMPT Case History Sheet				
	MICRO OE COMMENTS: Record the clinical history provided on the CMP Case History Sheet				
	STUDY: Select the study CMPT NOTE: Without this step, the specimen will not qualify to the review worklist				
4	Place the requisition barcodes for all specimens accessioned on a separate piece of paper and attach to the paperwork that accompanied the survey. Place all papers on the Dark Room bench.				

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APPROVAL:

Date

March 14, 2024

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Director, Laboratory and Diagnostic Imaging Service

REVISION HISTORY:

REVISION	DATE	Description of Change	REQUESTED BY
1.0	07 Mar 17	Initial Release	L. Steven
2.0	30 Jan 22	Procedure reviewed and added to NTHSSA policy template	L. Steven
3.0	14 Feb 24	Procedure reviewed	L. Steven

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