

Core Lab Meeting Minutes

Sept 11 ,2024
Time

Attendee	Present?	Attendee	Present?	Attendee	Present?
Lisa(Recorder)	✓	Amelia	✓	Jolina	✓
Theresa	✓	Jobelle		Cindy	✓
Erin		Hanna	✓	Brianne	✓
David		Uswald		Amy	✓

- Micro Samples- Please be aware if sites are sending us CAT A boxes that you do not open but bring directly to Micro. Celica/Laura will begin a new packing process for Micro samples where samples will be placed in separate envelopes and the whole envelope will be placed in the appropriate bucket for Micro to retrieve. CAT A boxes will also be specially labelled. Positive blood cultures will be placed in the RT envelopes, they can stay in these envelopes until Micro retrieves them.
- Coag Supplies- Please ensure at the end of your shifts that you look at reagents and supplies on board and top up what is needed ie reaction tubes
- Fax Audits- If you are removing any papers from the fax machine and you come across a fax reconciliation for LIS please place it in their folder by the fax machine. They are noticing that they are not getting them all back.
- 1 Year term- Our new person who was supposed to start Sept 23rd will no longer be joining us here. In the meantime, I will be trying to get Bayo up in Oct/Nov to help cover our vacations happening at that time.
- BB- There has been no change to the ordering of any products in Transfusion. RhIG 600 still needs to be ordered, please ensure you are checking the expiration dates on products and order according to the list posted as well as in binder 8.
- Appointment times- I have started to notice a trend where people are putting in for 2 hr appointment times that are at the end of their shift. Just a reminder that appointments are not a guarantee, and if the situation does not allow for someone to leave for an appointment, I will not approve it. Also, in alignment with the union you are allowed up to 2 hours for an appointment, it is not an automatic 2 hours. It is your responsibility to try and book appointments around your schedule and try your best to not have it during work hours. I know sometimes it is hard and I do try and make things work for everybody but if the trend continues, I will be more strict when it comes to these appointments.
- Progressive TSH testing- When you receive a requisition that the patient falls within the scope of choosing wisely, in order for APL to perform the FT4 and FT3 you must order the TSHPR on one order, then you must create a new order for the FT4/FT3. We are hoping this will solve our issue of APL not running these tests when required. Carolyn and I will monitor if this is working.

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- Shift changes- Just a reminder that when you switch shifts you need to code it as if the original scheduled person is working that shift. IE: if you take somebody's C1 call on Saturday, you have to code it as a SBW, not a SBU. Even though you are off, you are choosing to take the shift/call so you must be paid at the same rate the other staff member would be getting paid. The same thing applies if you just worked 2 weekends in a row, and you decide to take another staffs week end day shift, you can't claim it at OT because it is a third week end worked for you. It is taken at straight time.
- Synovial Fluids- Going back to our conversation about clumps in Synovial fluid. I have asked LIS to add a comment for when you use Hyaluronidase to try and dissolve clots. It is now available under the WBS count box and the code is @HYAL and it reads "Specimen contains clots. Hyaluronidase added to help liquefy the sample. Cell Count(s) should be considered approximate as clots likely to contain cellular elements." Please ensure comment is added to these samples when used.
- Blood Culture- Some questions were asked about entering BC on call. You should be entering Blood cultures before loading them. My practice was always to enter them while I was doing other bloodwork, then setting them aside until I can get into Micro and load them.
- Transfusion (Amy)-A reminder that when you have an Anti Le A/B or Anti M you do not need to use units negative for that antigen, unless you suspect the antibody is causing a reaction/hemolysis. Also watching requisitions coming in, we had a requisition for a patient in ER with a diagnosis of possible ectopic pregnancy. They only ordered ABORh, but this patient should have been banded and a G&S completed in case of a bleed. The same goes for patients requiring RhIG.
- Performance documents are ready to be filled out. I will be coming up with a learning objective for everyone to put in before we start meeting about them
- LIS EOI is now posted. It is for a 1-year term starting October 28. The deadline to send resume to Wanda is Sept 20, 2024 at 1600.