

Core Lab Meeting Minutes

May 7, 2025

Time 1400

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

- White out- please keep in mind that you can't use white out when it comes to official documents in the lab. This includes temperature charts, checklists etc. If you make an error scratch it out, initial it and record the proper information. Also noted that pencils should not be used on official documents.
- Evening shift- Last week we talked about the 2-10 staff members not showing up until 3 when the day staff are on call. I gave the option of returning to both staff coming in at 1500 if this is what people wanted, keeping in mind there will be no OT to stay and cover until the evening staff arrives. Have there been any talks about what staff want to do? Staff have decided to keep things as they are with a 2-10 and a 3-11 shift.
- Cord Samples- OBS requested a staff member to run a Nbil on a cord sample the other night. I did some research and couldn't find any clear answers. I will say this sample type has not been validated for this test, and the cord samples would not be protected from light, so I would lean on the side of not performing this when requested. If they ever ask again, we will have to say no and let them know this samples type may not produce a valid result and that a capillary sample should be collected instead. If you have any issues, you can let them know to contact lab during the day.
- Accreditation- Last week I spoke about the importance of making sure we complete the weekly/monthly maintenance on the fridge/freezers, water bath, etc. Starting in June we will begin monitoring this to make sure we are compliant with this standard. We are doing it randomly however we need to make sure we are doing it consistently. I will also be putting up a maintenance sheet for the Chemical fume hood, as this should also have some periodic cleaning. Micro has this maintenance come up in TQC, is this something people would want as a reminder to perform these tasks?
- Responsible Person- While I was away in March, I was notified that there were some issues around this role, so I was advised to have documentation of what people's preferences are. Please fill out the form indicating whether you would like to rotate through this role in my absence and give back to me to have uploaded into your file.
- PKU's- It was brought up that staff are being asked to do PKU's more often on call as RN's insist it needs to be done at 36 hrs. I will discuss this with Carolyn as she is currently writing an SOP for this. In the meantime, please document the order numbers when this happens. This way it can be

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investigated, and we can see if it was really warranted. Also keep in mind that the PCC is the supervisor in charge during off shifts. If OBS is insistent on this contact the PCC and let them know the situation, it will be their final decision of this will be collected or not. If you are extremely busy with stats, ensure you relay that message to the PCC.

- Blood Bank items:
 - Note that when a mom had a positive Antibody screen the Antigen testing also needs to be completed on your samples. Amy is working on the SOP that will state this. If it is an Antigen, we do not test here we will send it to CBS
 - HDN- Amy is working on a new requisition for this so all the testing above will be included on this requisition
 - IVIG- when units are requesting this, they need to tell you exactly how many grams they require. It is not our responsibility to do the math for them as there may be other factors to be considered
 - Still some old requisitions floating around, Amy will notify them again of the new requisitions as they will only be accepted until June 1, 2025
 - Rhogam- this is the only product that we would ever ship to the communities, except for home care patients. The community still needs to send a sample to us for testing then we will send products to them. It should be transfused the day it arrives, may allow it to sit overnight and infuse the next day. There should be no longer than 1 week between testing time and patient receiving Rhogam.