

TRAINING UPDATE

Lab Location: GEC, SGAH & WAH
Department: Core Lab

Date Distributed: 7/11/2014
Due Date: 8/15/2014

DESCRIPTION

Subject:

Core & QA Team Meeting

Meeting information:

- The Core & QA Team meets every 2 weeks.
- Regular members are Rob, Zanetta, Ash and Leslie.
- Other lab personnel are invited to serve as subject matter experts, as needed
- Minutes are recorded and emailed to members, lab management, medical director and core lab Group Leads

Goals:

- Track projects associated with SOPs (review and revision), training & competency.
- Provide a forum to investigate and address core lab process problems or issues identified by staff, lab management or others.
- Assure that changes are communicated to staff via hands-on training or training updates
- Assure that projects move to completion

Rather than post all minutes for staff to review, the team has compiled a summary of the accomplishments for January to June 2014. The summary also includes projects that are currently in process.

Please review the attachment and acknowledge your review. Any questions should be directed to Rob and Zanetta.

QA & Core Team Meeting Accomplishments Jan - June 2014

Verbal Release of Test Results to Outside Locations – new SOP implemented 1/1/14
All competencies for Feb - May 2014 revised to comply with CAP regulations. Group Leads trained to perform direct observations
Mid Cycle CAP Inspection performed in 2013, 90 deficiencies identified and corrected
New Xpand implemented 1/7/14. Retired iSTAT sop for Chem8 and troponin.
Iris UA SOP revised to include guidelines for comparison of chemical results with microscopic exam, implemented 2/1/14.
Iris instrument settings standardized on 1/29/14, will alert for comparison at both sites
Humidity Validation to expand range was completed. Revised SOP implemented 2/1/14
GEC LH 750 validation and SOP completed, staff trained. Implemented 2/4/14
Airfuge Ultracentrifuge SOP and log - training update completed, implemented 3/1/14
Chemistry Dilution SOP implemented 3/1/14
WAH ED Pilot program to re order tests on rejected samples. Staff trained, process implemented 3/3/14
New Vista reagents for Alk Phos and NH3 – validations, SOPs and training update completed, implemented 3/6/14
SGAH pH meter validation and SOP completed, staff trained. Implemented 3/17/14
Vista Calibration SOP revised to add programming for lot-to-lot correlation, training update completed, SOP implemented 4/1/14
Revised Gram Stain QC Logs implemented 4/1/14
HcG Cen Med SOP revised due to changes in package insert, training update completed, SOP implemented 4/1/14
PTT SOP revised to add specimen collection if Hct >55, training update completed, SOP implemented 4/15/14
Revised Xpand QC schedule to include 2nd analyzer, training update completed, implemented 4/21/14
Body Fluid and CSF SOPs revised to add reporting cholesterol crystals (BF) and add new stain process. Staff trained, SOPs implemented 5/1/14
LH750 SOP revised to replace Reagent Change Log with process for Background count documentation when reagents changed, training update completed, SOP implemented 5/8/14
SQ Worksheets reviewed to align worksheets & benches between sites. Moved occult blood, gastrocuccult and rota to IM2 worksheets, WIM2 removed from group worksheet UAW. Implemented 5/13/14
Vista CRP SOP revised to make reference ranges match LIS, no training update needed, SOP implemented 5/22/14
Carry Over SOP revised to add PTN for SG & WAH and remove LDH from GEC, training update completed, SOP implemented 6/1/14
Iris Body Fluid SOP revised to match changes in manual testing SOP and clarify dilution tables, training update completed, SOP implemented 6/1/14
TDM SOP revised to include new process for documenting dosage information on Outpatients. Implemented 6/18/14.
New Sweat Test validation completed. Staff trained and SOP implemented 6/25/14
Equipment Repair SOP and Repair Down Time log revised, training update completed, implemented 7/1/14
Rapid Test SOP and log revisions to change frequency for controls, training update completed, implemented 7/1/14
Reviewed and revised Core training documents due to instrument changes and align with benches, completed 6/19/14
Reviewed and revised GEC training documents due to instrument and test menu changes, completed 7/9/14

QA & Core Team Pending Tasks

Revised 8 Vista SOPs for Chem1 calibrator change, training update in process as of 7/1, plan to implement on 8/1
Remaining COAG SOPs revised to add specimen collection if Hct >55, update AMR for fibrinogen and change reference range for fibrinogen. Training update pending until implementation date chosen.
All competencies for Aug - Nov 2014 to be reviewed & revised to comply with CAP regulations.
Body Fluid SOP revision to include process for GEC to send synovial fluid to SGAH
ESR Stat Plus SOP revised to include proper instructions for controls. Training update pending until implementation date chosen.
Manual ESR SOP revised to correct AMR. Training update pending until implementation date chosen.
Revised Vista LDH & Total Protein SOPs for fluid testing. Training update pending until implementation date chosen.
Malaria SOP revision to update thick smear reporting and create new GEC SOP for slide preparation. Malaria history form revised. Final SOPs pending.
Vista CK SOP revision for dilutions and exceeding CRR. Training update pending until implementation date chosen.
Uncontrolled documents and forms at GEC being collected. Will be evaluated and added to document control as needed.