

Quest Diagnostics at

Shady Grove Medical Center and Washington Adventist Hospital

MEETING

MINUTES

3.28.2017

PRESENT:

SGMC: 3.28.2017 @ 0635-0715 STEPHANIE CODINA, YESHIWAS BELEW, DOSS BEYENE, ZEBENE DERESSE, TAMARA MOSLEY, YVONNE NGWA, ANNE RIENKS, BERNICE TSIGBEY

SGMC: 3.28.2017 @ 1600-1630 STEPHANIE CODINA, MELAKU ASFAW, HOJAT GOUDARZI

WAH: 3.29.2017 @ 0650-0720 STEPHANIE CODINA, GEORGE LI, NHIMBA MWINGA, DIPTI PATEL

WAH: 3.29.2017 MEETING CANCELLED; ALL STAFF HAVE ALREADY ATTENDED A SESSION

DISTRIBUTION: BLOOD BANK STAFF MEMBERS

MEETING COMMENCED:

Item	Discussion	Action	Follow-up
Minutes			
Blood Orders	<ol style="list-style-type: none"> 1. Orders: <ol style="list-style-type: none"> a. All ad hoc orders go to IBDS b. All reference orders to go ARC c. We split the remaining orders 50/50. We order from ARC on Monday and Friday and IBDS on Tuesday and Thursday. Please increase the Thursday order if we are ordering heavy on Mondays. 2. Reminder: We need to notify IBDS if we have any Inova platelets within 24 hours of expiration. They will move them to another hospital to avoid expiration. 3. Inova does not have an IBDS transfer form. We use our internal transfer forms. We will have to fax a copy of the transfer report on the first of each month. We are testing this. Note to staff: Please do not use ARC transfer form or fax transfer for to ARC when transferring IBDS products. 4. Staff state IBDS is not automatically sending our standing orders; they are asking us to fax. 	Follow up with IBDS regarding standing orders	Stephanie
Cryoprecipitate	<ol style="list-style-type: none"> 1. Review of cryo labels with staff to point out 	None	None

Item	Discussion	Action	Follow-up
	<p>the difference between a pooled vs single cryo. (see attached)</p> <ol style="list-style-type: none"> 2. We should only be ordering "pooled cryo." If you completed the ARC ad hoc order form, you must write "pooled cryo." 3. When you enter cryo, be sure to look at the label. Also, you will have to type in volume for pooled product and not with individual product. 4. Review of incident that happened. 		
Patient Hx for Antigen Typing	<p>Several people are not entering antigen typing in the LIS if performed for a new antibody on a patient for whom we cannot obtain history. This is not necessary.</p> <ol style="list-style-type: none"> 1. If antigen typing negative, report. It is very unlikely that the patient will have been transfused enough to make a positive person test negative. Report. 2. If antigen typing is positive, look very closely for a mixed-field reaction. If no mixed-field, you can report. 3. Do not report positive, mixed-field results. 	None	None
Antibodies to Low Frequency Antigens	<p>Staff need to know the clinically-significant antibodies to low frequency antigens. This includes, but is not limited to:</p> <ul style="list-style-type: none"> • Kpa • Wra • Jsa • Dia • Cob • Cw <p>If the antibody demonstrates at strength of 2+ or greater, you do NOT need antigen-negative units. This is because the crossmatch should be incompatible (strong antibody).</p> <p>If the antibody demonstrates at strength of 1+ or less, you must antigen type, because the crossmatch may be compatible (weak antibody).</p>	None	None
PI/Variations	<p>When completing a PI/variance, please be sure it tells a story.</p> <ol style="list-style-type: none"> 1. For wasted cryo and plasma that were thawed but not transfused <ol style="list-style-type: none"> a. # ordered b. # transfused to patient c. # reallocated to another patient d. # wasted e. Documentation of thaw charges (1 per thawed unit) 2. For wasted units due to nursing 	None	None

Item	Discussion	Action	Follow-up
	<ol style="list-style-type: none"> a. Reason for wastage b. Time returned c. Temp upon return d. Attach original request form to PI <ol style="list-style-type: none"> 3. Platelets and red cells that expire on the shelf and were NOT ordered in special for a patient (antigen negative, etc) DO NOT get counted as allocated, outdated. These are expired. 4. At a minimum, we must have the nurse's first initial and last name. 		
Billing	<p>Billing cannot be edited in Sunquest once it is saved. Billing will update in Sunquest, but changes will not be sent to Cerner unless a PM Resend is done.</p> <ol style="list-style-type: none"> A. To delete billing, bill the appropriate credit test. B. To add billing, leave a note for Stephanie to add in Cerner. <p>Reminder that we must bill for CMV-seronegative and sickle testing at the time of issue. For neonatal units, we bill the A0 split only.</p>	None	None
Sickle Screen	<p>For how long do you have to incubate sickle testing?</p> <ul style="list-style-type: none"> • Positives = 6 minutes • Negatives = 15 minutes <p>The negative control has to incubate for 15 minutes. All tests have a positive and negative control, so all tests should incubate for 15 minutes.</p>	None	None
Schedule	<p>Normally all shift changes, time off, shift additions must be on the schedule. HOWEVER, if there is a sick call/call out, these may not get added to the schedule. We want the schedule to reflect that one person was scheduled and called out and another person was called in. Group Leads/TIC do have the authority to fill the schedule or call people in as needed. This will not always get put on the schedule.</p> <p>If we have open holes, we will try to fill the holes with PT/PRN staff first to avoid overtime.</p>	None	None
Competencies	<ol style="list-style-type: none"> 1. Immucor competencies should be done by the end of the week. If you have not already gotten approval to submit to Immucor, please give to Stephanie soon. 2. All staff will need to complete daily QC (rack 1, rack 2, echo). Please arrange a time to do this with night shift. You will also need day of use and reagent receipt QC to get signed off of the competency. 3. All staff will be required to complete daily and weekly Echo maintenance this year. Please schedule a time to complete this. 		
Open Forum	<ol style="list-style-type: none"> 1. Be proactive when you notice we are short on a reagent. Document on the reagent log, 	None	None

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	<p>communication log, or tell someone. Do not assume another person will notice and address.</p> <ol style="list-style-type: none"> 2. Some off shift staff are having difficulty performing audits. Reminder: You would arrange for another staff member to perform your audit if you are unable to complete. 3. Do we want to track cord bloods without orders for the PI projects? Yes, we can use the form that processing uses. 4. We cannot call IBDS from WAH, because it's a long distance number. 		

Meeting adjourned

Next meeting the week of May 1, 2017

Stephanie Codina
Recording Secretary



W2053 17 937630 S U

The American National Red Cross Greater
Chesapeake and Potomac Region
Baltimore, MD 21215
FDA Registration Number 1173011

Properly identify, intended recipient,
See circuler of information for indications,
contraindications, cautions, and methods of infusion.
This product may transmit infectious agents.
Rx only

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E3587V00

**POOLED
CRYOPRECIPITATED AHF**

120 mL
Number of Units in Pool 5
Store at -18 C or colder



5100

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Rh POSITIVE



0170870609

28 MAR 2017 06:09

Expiration
Date/Time

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