TRAINING UPDATE

Lab Location: Department:

GEC Core **Date Distributed:** 6/27/2017 **Due Date:** 7/20/2017 **Implementation:** 7/5/2017

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Diff-Quik Stain Kit GEC.H246 v0

Hematology Differential Comparison and Manual Stain Quality Log AG.F36.2

Description of change(s):

This SOP has been changed from a system SOP to a 'GEC-only' one (SG & WAH will no longer perform it)

No change to the contents of the SOP.

Differential and Stain Comparison log revised to reflect comparison to Sysmex instead of LH750

This SOP and Form will be implemented on July 5, 2017

Document your compliance with this training update by taking the quiz in the MTS system.



Hematology Differential Comparison and Manual Stain Quality Log

| Date | Tech | Sample | Source | Poly ± 10 | Lym ± 10 | Band ± 5 | Mono ± 3 | Eos ± 3 | Baso ± 3 | Plt see below | Diff Evaluation S - satis U - unsat | |
|------|------|--------|------------|-----------|----------|----------|-------------|------------|----------|------------------|-------------------------------------|--|
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |
| | | | Sysmex XN | | | n/a | | | | | | |
| | | | Manual | | | 11/ α | | | | | | |
| | | | Difference | | | | | | | OK Not OK | | |

Platelet Instructions: Record count from Sysmex XN. Indicate manual smear as Decreased, Normal, Increased or Clumped.

Criteria: Count <150= Decreased; Count 150-450 = Adequate; Count >450 = Increased; Clumped = plt clumps seen on smear Circle OK or Not OK to evaluate the automated and manual comparison

| Supervisor Review | |
|-------------------|--|
| | |

AG.F36.2 Revised 7/2017

Non-Technical SOP

| Title | Diff-Quik Stain Kit | |
|-------------|---------------------|-----------------|
| Prepared by | Leslie Barrett | Date: 6/16/2017 |
| Owner | Robert SanLuis | Date: 6/16/2017 |

| Laboratory Approval | | | | | | |
|--|-----------------------|------|--|--|--|--|
| Print Name and Title | Signature | Date | | | | |
| Refer to the electronic signature page for | | | | | | |
| approval and approval dates. | | | | | | |
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| Local Issue Date: | Local Effective Date: | | | | | |

| Review: | | | | | |
|------------|-----------|------|--|--|--|
| Print Name | Signature | Date | | | |
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1. PURPOSE

This procedure describes the process for manually staining. It may be used as a backup method for automated stainers.

2. SCOPE

This procedure applies to manual staining for differential testing.

3. RESPONSIBILITY

All staff performing differential testing must comply with this procedure.

4. **DEFINITIONS**

None

5. PROCEDURE

A. Supplies

- Coplin jars with lids or Sterile urine cups
- Mechanical rotator (for mixing the sample)
- Microscope slides
- Distilled or deionized water

B. Reagents

NOTE: Labeling requirements for all reagents, calibrators and controls include: (1) Open date, (2) Substance name, (3) Lot number, (4) Date of preparation, (5) Expiration date, (6) Initials of tech, and (7) Any special storage instructions. Check all for visible signs of degradation.

The package insert for a new lot of kits must be reviewed for any changes before the kit is used.

| Reagent | Diff-Quik Fixative Solution |
|--|---|
| Hazard | Danger. Contains Methanol >50%. May be fatal or cause blindness if swallowed. |
| | Poison. Flammable. Vapor harmful. Causes eye irritation. Do not breathe vapor. Do not get in eyes, on skin or clothing. Keep container closed. Use with adequate ventilation. Keep away from heat, sparks and open flame. Wash thoroughly after handling. |
| Container | 500 mL bottle |
| Storage | 15-30C |
| Stability Stable until expiration date on box label. | |
| Preparation Ready for use as supplied. | |

| Reagent | Diff-Quik Solution I |
|-------------|--|
| Hazard | Warning - Contains sodium azide. |
| | This may react with plumbing to form highly explosive metal azides. If discarded into sink, flush with a large volume of water to prevent azide buildup. |
| Container | 500 mL bottle |
| Storage | 15-30C |
| Stability | Stable until expiration date on box label. Discard if microbial growth is observed. |
| Preparation | Ready for use as supplied. |

| Reagent | Diff-Quik Solution II | | |
|-------------|---|--|--|
| Container | 500 mL bottle | | |
| Storage | 15-30C | | |
| Stability | Stable until expiration date on box label. Discard if microbial growth is observed. | | |
| Preparation | Ready for use as supplied. | | |

C. Specimen: Slide made from blood collected in EDTA tube or slide made from a direct finger stick or stool sample

D. Staining

- 1. Place Fixative Solution, Solution I and Solution II into 3 labeled containers. Cover tightly when not in use.
- 2. Thoroughly mix the blood sample and prepare a blood film slide.
- 3. Label slide with patient Last name, First initial, Date and accession number.
- 4. Dip slide into fixative solution 5 times, one second each time. Allow excess to drain.
- 5. Dip slide into Solution I five (5) times, one second each time. Allow excess to drain.

- 6. Dip slide into Solution II five (5) times, one second each time. Allow excess to drain.
- 7. Rinse slide with distilled or deionized water.
- 8. Allow slide to air-dry and examine under oil immersion lens.
- 9. Perform differential count according to the manual differential procedure.

Notes:

- For more intense overall stain, increase number of dips in Solutions I and II.
- For paler stain, decrease dips in Solutions I & II, but never go below 3 dips of one full second each.
- To increase eosinophilic staining, increase dips in Solution I.
- To increase basophilic staining, increase dips in Solution II.

E. Quality Control

1. Stain Quality

Examine a stained smear utilizing a light microscope under an oil immersion lens. Record the stain quality as S (Satisfactory) or U (Unsatisfactory) on the Hematology Differential Comparison and Stain Quality Log using the criteria below.

A properly stained smear should have the following characteristics:

- a. RBC Pink with central pallor
- b. Platelets Violet to purple granules
- c. NRBC Dark purple nucleus
- d. WBC
 - Neutrophil Dark purple nuclei with light pink cytoplasm dotted with lilac granules.
 - Lymphocyte Dark purple nucleus. Cytoplasm with varying shades of blue (robin's egg blue).
 - Monocyte Cytoplasm of monocytes stains a faint bluish gray tinge.
 - Eosinophil Bright red to orange granules.
 - Basophil Granules very dark bluish purple granules.

2. Differential Comparison

- a. Prepare a blood smear from a specimen analyzed by the automated hematology analyzer.
- b. Stain the slide and perform a manual differential.
- c. Compare the results of the manual differential with the automated differential.
- d. Record the results on the Hematology Differential Comparison and Manual Stain Quality Log and verify that the manual differential meets the criteria given on the log.

Note: This process is NOT performed if the automated differential analyzer is not in operation and only a non-automated system is in use. Record "not in use" on the Log.

6. RELATED DOCUMENTS

Sysmex XN Series Operation for CBC and Reticulocytes, Hematology procedure Hematology Differential Comparison and Manual Stain Quality Log (AG.F36)

7. REFERENCES

Diff-Quik stain set insert, SIEMENS Healthcare Diagnostics, Inc., 9/2008

8. REVISION HISTORY

| Version | Date | Reason for Revision | Revised By | Approved By |
|---------|------|-------------------------|---------------|----------------|
| | | Supersedes SOP SGAH06.2 | | |
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9. ADDENDA AND APPENDICES

None