

CHEMISTRY SHIFT COMMUNICATION LOG

- St. Joseph Medical Center Tacoma, WA
 St. Clare Hospital Lakewood, WA
 St. Elizabeth Hospital Enumclaw, WA
 St. Francis Hospital Federal Way, WA
 St. Anthony Hospital Gig Harbor, WA
 PSC

DATE : _____

ISSUE	NIGHT SHIFT Check box to indicate completion of task.	DAY SHIFT Check box to indicate completion of task.	EVENING SHIFT Check box to indicate completion of task.
QC	<input type="checkbox"/> No QC Performed <input type="checkbox"/> Routine QC Performed <input type="checkbox"/> Reviewed all DXC LVJs <input type="checkbox"/> All QC & repeats verified in Cerner <input type="checkbox"/> Verified LVJs review in Cerner <input type="checkbox"/> Lookback done <input type="checkbox"/> QIM	<input type="checkbox"/> No QC Performed <input type="checkbox"/> Routine QC Performed <input type="checkbox"/> Reviewed all DXC LVJs <input type="checkbox"/> All QC & repeats verified in Cerner <input type="checkbox"/> Verified LVJs review in Cerner <input type="checkbox"/> Lookback done <input type="checkbox"/> QIM	<input type="checkbox"/> No QC Performed <input type="checkbox"/> Routine QC Performed <input type="checkbox"/> Reviewed all DXC LVJs <input type="checkbox"/> All QC & repeats verified in Cerner <input type="checkbox"/> Verified LVJs review in Cerner <input type="checkbox"/> Lookback done <input type="checkbox"/> QIM
REAGENT	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No Reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> In Use Reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Diskette loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CriticalSupplyLog <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> End of shift Adequate inventory	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> In Use Reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Diskette loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CriticalSupplyLog <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> End of shift adequate inventory	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> In Use Reagents Loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Reagent <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NS Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> NL Calibrator <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Diskette loaded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> CriticalSupplyLog <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> End of shift adequate inventory
INSTRUMENT	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument OK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument DOWN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Maintenance (see schedule) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No Maintenance Done <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Troubleshooting (see log) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> QIM <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Service Call Ref # _____ Tech ID _____ <input type="checkbox"/> Checked for Mogul alerts	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument OK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument DOWN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Maintenance (see schedule) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No Maintenance Done <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Troubleshooting (see log) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> QIM <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Service Call Ref # _____ Tech ID _____ <input type="checkbox"/> Checked for Mogul alerts	574 / 474 / 330/OSMO <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument OK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Instrument DOWN <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Maintenance (see schedule) OSMO <input type="checkbox"/> Check/Change Fluid Tech ID _____ <input type="checkbox"/> Clean Filter Monthly on the 1 st Tech ID _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No Maintenance Done <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Troubleshooting (see log) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> QIM <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Service Call Ref # _____ Tech ID _____ <input type="checkbox"/> Checked for Mogul alerts
Verbal Dept Hand-off	<input type="checkbox"/> Problem patient _____ <input type="checkbox"/> Final WCP pulled & reconciled <input type="checkbox"/> Dept. messages & Comm Log Handed off by _____ Received by _____	<input type="checkbox"/> Problem patient _____ <input type="checkbox"/> Final WCP pulled & reconciled <input type="checkbox"/> Dept. messages & Comm Log Handed off by _____ Received by _____	<input type="checkbox"/> Problem patient _____ <input type="checkbox"/> Final WCP pulled & reconciled <input type="checkbox"/> Dept. messages & Comm Log Handed off by _____ Received by _____

COMMENT (Please document any Beckman Automation issues under the comment section):

PLEASE TURN OVER FOR MORE COMMENT SPACE