

MISC RAPID LAB TEST 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: _____		NIGHT SHIFT	DAY SHIFT	EVENING SHIFT
STATUS	STATUS GOOD	<input type="checkbox"/> Gem <input type="checkbox"/> AcT2 <input type="checkbox"/> FFN <input type="checkbox"/> VNOW <input type="checkbox"/> IStat	<input type="checkbox"/> Gem <input type="checkbox"/> AcT2 <input type="checkbox"/> FFN <input type="checkbox"/> VNOW <input type="checkbox"/> IStat	<input type="checkbox"/> Gem <input type="checkbox"/> AcT2 <input type="checkbox"/> FFN <input type="checkbox"/> VNOW <input type="checkbox"/> IStat
ISSUE	INSTRUMENT STATUS	<input type="checkbox"/> Down <input type="checkbox"/> Instrument: _____ <input type="checkbox"/> See TS Log/QIM	<input type="checkbox"/> Down <input type="checkbox"/> Instrument: _____ <input type="checkbox"/> See TS Log/QIM	<input type="checkbox"/> Down <input type="checkbox"/> Instrument: _____ <input type="checkbox"/> See TS Log/QIM
	SERVICE CALLED	Hotline tech _____ Ref # _____	Hotline tech _____ Ref # _____	Hotline tech _____ Ref # _____
GEM	REAGENT	<input type="checkbox"/> N/A <input type="checkbox"/> New Cartridge <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Cartridge change maint	<input type="checkbox"/> N/A <input type="checkbox"/> New Cartridge <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Cartridge change maint	<input type="checkbox"/> N/A <input type="checkbox"/> New Cartridge <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Cartridge change maint
	QC & MAINT	<input type="checkbox"/> N/A <input type="checkbox"/> CVP done @ cartridge change.	<input type="checkbox"/> N/A <input type="checkbox"/> CVP done @ cartridge change.	<input type="checkbox"/> Daily Maintenance <input type="checkbox"/> CVP done @ cartridge change.
ACT2	REAGENT	<input type="checkbox"/> N/A <input type="checkbox"/> New Reagent Box <input type="checkbox"/> New Lot <input type="checkbox"/> New Shipment	<input type="checkbox"/> N/A <input type="checkbox"/> New Reagent Box <input type="checkbox"/> New Lot <input type="checkbox"/> New Shipment	<input type="checkbox"/> N/A <input type="checkbox"/> New Reagent Box <input type="checkbox"/> New Lot <input type="checkbox"/> New Shipment
	QC & MAINT	<input type="checkbox"/> N/A <input type="checkbox"/> LBC QC Done	<input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> High <input type="checkbox"/> Daily Maintenance <input type="checkbox"/> LBC QC Done	<input type="checkbox"/> N/A <input type="checkbox"/> LBC QC Done
FFN	REAGENT	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done
	QC & MAINT	<input type="checkbox"/> N/A <input type="checkbox"/> Wet QC for NL/NS	<input type="checkbox"/> N/A <input type="checkbox"/> Daily EQC <input type="checkbox"/> Daily Maintenance <input type="checkbox"/> Wet QC for NL/NS	<input type="checkbox"/> N/A <input type="checkbox"/> Wet QC for NL/NS
VNOW	REAGENT	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> Wet QC done
	QC & MAINT	<input type="checkbox"/> N/A <input type="checkbox"/> EQC, if prompted	<input type="checkbox"/> EQC Daily <input type="checkbox"/> Daily Maintenance <input type="checkbox"/> Twice Monthly <input type="checkbox"/> Monthly	<input type="checkbox"/> N/A <input type="checkbox"/> EQC, if prompted
ISTAT	REAGENT & QC	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> QC done	<input type="checkbox"/> N/A <input type="checkbox"/> New Lot <input type="checkbox"/> New Ship <input type="checkbox"/> QC done
WCP	Verbal Dept. Hand-off	<input type="checkbox"/> Final WCP pulled & reconciled @ _____ <input type="checkbox"/> Handed off by _____ <input type="checkbox"/> Received by _____	<input type="checkbox"/> Final WCP pulled & reconciled @ _____ <input type="checkbox"/> Handed off by _____ <input type="checkbox"/> Received by _____	<input type="checkbox"/> Final WCP pulled & reconciled @ _____ <input type="checkbox"/> Handed off by _____ <input type="checkbox"/> Received by _____

COMMENTS:

PLEASE TURN OVER FOR MORE COMMENT SPACE