***Hematology Lab Meeting.***

**10/29/2021 @ 9:00 am**

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| *Present:* |  ***John Errico*** |

Announcement:

CAP Onsite Inspection will be Wed. Nov. 3 and Thursday, Nov. 4.

* Some reminders: all reagents labelled with open and expiration dates.
* Logs completed.
* Discard expired reagents.
* No copies of procedures in labcoat pockets.
* If you are asked for a procedure- check with a supervisor.
* If you are asked a question you are not sure of, refer to the procedure.
* Follow all safety procedures and protocols.
* Reminder of the eye washes, front and back, make sure those are getting signed off

 CSF samples, when run on the XN they shouldn't be transferred to a lavender top tube, they should be either in a clear top one or a clear plastic tube. We noticed that red blood cell maybe discrepant.

The new schedule is out and we need people to sign up for some evenings shifts

Our 2 new hires are scheduled to start next month. Isabella will be for the evening shift starting Nov. 8 and Kayla will be for the night shift, starting Nov. 22.

The new schedule will be out soon. Donna is working on it. Since Christmas and New Year falls on Saturday this year, the weekends will be Friday and Sunday. There will be a need to cover night shifts to cover for vacations for Kyle and Gail.

Eosinophils > 20, Do the diff first time. Subsequent diffs are not needed if they are consistent with previous manual diff. Only if there is a change in the autodiff.

There is an updated procedure for Critical Values for CBC reference ranges that needs to be signed off in MediaLab. This change will Go Live on Nov. 9 @ 10am. This includes all the age ranges for pediatric and adults male, female, and unspecified genders.

If notice see any issues, let Beth or John know. The only issue might be the critical values, and color coordination might not be updated on time in WAM. Note: New criticals will be a Platelet Delta Check will flag greater than 50 % decrease and will now be a critical call. A fixed comment is going to be created to place in the com log to document the platelet delta check. Oncology floors inpatient and outpatient will reflex only when call is needed on the hematology critical call follow up work list. No longer need to cancel out calls for oncology floors. Also platelet counts <=30 or >=1,000,000 will be a critical for non-oncology floors. Newborn babies (0<14 days): ≤50 or ≥800 platelet count. Labor & Delivery floors: ≤100 platelet count.

One of the iSED will be sent out for repairs for about 6 -10 weeks and we'll have a loaner. A replacement pump is on its way. If there are any other problems let Lisa know.

When you are pipetting TEGs, use an alcohol wipe to clean blood before putting it away.

In routine coag: don't take the racks out until the error is cleared and a pop-up window comes up asking to remove the rack from the analyzer.

Going forward the following tests will require a review and agreement by any 2 competent techs: 6 months competency and beyond, prior to releasing results. They do not need to be checked by a supervisor or MTB. This change is being initiated to improve patient care, as it is important to get these test out at a timely fashion and waiting on a supervisor to review can slow the process

The procedures are being updated but for now it will be an amendment until it gets through the medialab review process.

* Bacteria/Yeast Present in CSF/Body Fluid
* Joint Crystals – both positive/negative
* Positive Parasites and Quantitation

Per John: If you feel you need more practice with any of these to be comfortable please let myself or a supervisor know and we will work to get you the exposure and comfort level needed.

If there is anything you are uncomfortable with or there is not agreement it is still always ok to ask the opinion of myself or one of the supervisors.