**Morning Meeting Attendees:**

**Afternoon Meeting Attendees**:

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| **Agenda Item** | **Discussion** |
| **Documentation** | Reagent Exp dates   * System Clean = 6 months * Use saline bottle stickers on the saline cube because the note about 30d after opening is not on the same side as the opening   Communication log – “not a blog”   * It is a legal document; do not use it to complain about others. It is strictly for communicating information essential to work |
| **Tango** | Indeterminate reactions and false negative screens on Tango   * The only way to override a weak or indeterminate positive reaction without errors is to re-run it on the tango.   + Do NOT run in tube and call it negative   + If it is negative in tube panel call it an ABUS which forces an AHG crossmatch   + Weak antibodies can still be clinically significant   Dr. Hess has agreed to look into other analyzers   * May look into Bio-Rad gel analyzer, gel cards can be used manually   Write a QI and call Bio-Rad if you load up the Tango and the batch fails.   * This makes it so Bio-Rad can track the problem. |
| **Leadership updates** | Dr Hamilton Tsang starts in October  Ryan Lash |
| **Staffing** | Updates   * MLS lead on night shift in process of getting posted * If you know people send them to UWHires   Dress code expectations   * Comply with Hospital Dress Code <https://uwmc.uwmedicine.org/sites/PoliciesProcedures/apop/Pages/5-21.aspx>   Schedules |
| **Quality** | Irradiation Events   * Product was issued to patient as electronically irradiated but not physically irradiated * Run irradiation in batches of 6   + Concurrent documentation is mandatory   + If SOP has limits, follow those limits * Label check is required EVERY time BCP is used   + SQ can’t add label check as a required test to RBC because of the type confirmation test   Overriding QA failures when issuing:   * Make sure you are using the correct override * Read the message and review the history to know you are using the right one * Deann will review codes in SOP and SQ to address codes that don’t work and most frequently free texted comments |
| **Safety** | MTP kit replacement  Jenny   * PPE use:   + Coat and gloves when handling samples and products   + Eye protection when exposure is possible (pulling segments is an example) * Splash zones need to be designated * No more beverages at the window counter   + May look for a professional looking cupboard to put under the counter |
| **Training** | cGMP   * cGMP training is coming, stay tuned |
| **Department workflow** | New allocation bench phone 206-598-9619  Ringing phone can be answered anywhere by pressing 3 until you hear them  Handling RBC orders:   * It would be helpful to CLTs if the number of units ordered was updated sooner when the testing is incomplete because it looks like no one knows about the order.   + Ask MLS to update the number of units ordered when taking the sample back or Tango tech adds it at the beginning (instead of waiting until accepting Tango results)? * Should RBC orders be added to the pending white board for Tango?   Courier use and requesting   * If you need a courier it is our obligation to call the courier * The ONLY time we do not make the arrangements is when it is coming from Hospital Services in Renton   + BWNW-Central and SCCA is our responsibility     - Do grans still need to come through Central? They aren’t doing anything with it.   Jenny   * Survey for rearranging the lab workflow |
| **Sunquest** | IRR attribute missing after BCP (has the E code and product label says Irradiated but SQ is missing the attribute)   * Maybe sunquest had an error and wiped it? * Call Labmed IT, write a QI * If it is an emergency, add the IRR attribute in Blood Product Entry – Modify Unit |
| **Testing** | BWNW consultation requests   * Fill out Consultation Request form when sending samples to IRL for testing   + This gives them more information that can be helpful * Send enough sample for testing to be completed * Send out if testing is not done here or we can’t ID   + Put order in the folder and put on communication log in patient issues section |