**Chemistry Update 01/16/2023**

**Hospital Updates**

While it is sometimes difficult to keep up with general hospital news, please make every effort to do so. Keeping email updates in a specific folder is helpful so you can find things easily. Please ask if you need help setting this up in your email.

**Important Reminders:**

**Please remember:**

1. If a Master copy if needed, please print from Media Lab. The binder of “Master Copies” has been eliminated. I try and remember to put a master copy behind any new/updated forms in the respective binder.
2. You will note that some forms, such as the HCG patient result forms, have changed. We do enough of these that the change is warranted. For the FFN/RomPlus, the forms remain the same.
3. Please DO NOT use a marker that bleeds through any recording forms, e.g., the Temp Charts.
4. RomPlus kits were ordered 3 times in 2022, but there is only one reagent correlation sheet. Old CAP specimens or even liquid control may be used.
5. HIV reporting will change in the near future.
   1. All HIV presumptive Positive L&D patients, as well as all RomPlus and FFN results must be called.
   2. This info will also be in the GLS (Guide to Laboratory Services).
   3. The comments after the result will change also.
6. If products are received on 2nd and 3rd shift, please receive them (Sign and date the packing slip) and place the packing slip on my door. The products are to be put away.
7. We are still monitoring AM specimen completion time. Please put the

specimens on the analyzers ASAP. We are not meeting the expected TAT for these specimens. The standard, which is getting all specimens resulted by 0930, may be changing until such time as we have more Phlebs to go to the floor earlier.

1. ED Trop TAT is at 84% for December. We must get 85% resulted within 34 minutes. Please watch these carefully. TAT for BMP and BNP are good.
2. Recently, we did not do LDL testing for a few days because the QC was out of range. Testing did not resume until Allan returned. The values for the calibrator were not entered into the instrument. You will be assigned a calibration Quiz that will be a good reminder about the calibration procedure so this does not happen again.
3. Please remember to log all reagents/products that we lend to other labs on the sheets hanging near the schedule. Also, please note when they are returned. There are soooo many that it appears we have never been received back - but I don’t know if the list was just overlooked or the reagent was never returned to us.
4. Again, If you get an HbA1c with reflex to Glycomark – **you must order the glycomark**. **It is ordered only if the HbA1c is. >/=6.5 and <=8.0**
5. When running fluids, remember that only CSF has it’s own reagent and is reported as mg/dL. **Body fluids are gm/dL and are run as serum,** not urine tests. A fluid albumin was recently run as a urine microalbumin and the protein as a UPRO.
6. I have been missing some end of shift pendling logs. Don’t forget to print, account for all specimens, sign and place on my door.
7. There is a weekend in February (11/12) that I would like to see covered for Anuja as her absence is for business, not pleasure! Please let me know if you are able to help.
8. Thank you for all for efforts!!