

Micro Meeting Notes 3/17/22

General

Please let me know when CAP surveys come in. I need to register/log them into Epic before we can begin working on them and we have to make sure we give ourselves enough time to complete them by the due date.

Technical

The antibiotic QC sheets have been updated to include an area to record whether QC is being set up as weekly or with a patient. The same plate lot # should be used for both the patient and QC organism.

If we have a Staph species that will not give susceptibilities on the Vitek, we will be sending it to Quest for susceptibilities. We rarely come across these isolates and it creates more QC for us do.

Do not report Erythromycin on Group B Streps from prenatal patients. This is only used to detect inducible Clindamycin resistance and should not be reported.

Remember to add “presumptive I.d.” charge to urine isolates for Gram Stains performed resulting in organism sign out. For example, Lactobacillus, Yeast, Diphtheroids. Also use “coagglutination” charge when ruling in/out Staph aureus, even if coag negative staph is not being reported.

Finalizing SLT testing requirements. We are trying to get outpatient offices to give out Cary-Blair transport in addition to Para-paks. If not, specimens will have to be here within 1-2 hours of collection.

Tommy from Microscan will be here on Friday, 3/25 for a 2 hour training session. He will go over instrument maintenance, QC, and panel set up.