

Please below regarding the Teg 6s correlations and practicing Gram stains.

I encourage everyone to spend some time practicing gram stains since we will be responsible for performing them in the next month or so.

Because we don't get many TEG requests, we will need to perform the correlations any time we get specimens, so all three shifts will need to perform them. There are new TEG request forms in a yellow folder near the TEG 5000's, please send those forms to the floors when a TEG is requested. The forms have a line for the provider to indicate if the patient is cardiac, trauma or OB.

GRAM STAIN PRACTICE

Micro is sending us an aliquot of specimens they get for gram stains. The Specimens are in the refrigerator next to the fluid racks. Please try to find some time during your shift to practice staining and reading the gram stains.

- Please use the hood to prepare cytospin slides and to dry the slides. There is a heating block in the hood. Make sure the slide is completely dry before staining.
- a copy of the staining procedure can be found near the sink where the stains are kept.
- there is a log to record your results and the expected results near the sink where we will be performing the gram stains.
- Please use the pink bucket in the sink to capture the waste from the staining and then discard the waste into the waste container in the back of Hematology.
- If you have any questions about a slide, feel free to ask someone from Micro to look at it and give you some feedback.

TEG 6s correlation instructions :TEG 6s and the TEG 5000.

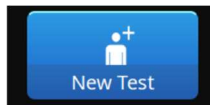
1. The Floors will notify the lab when they are drawing a TEG
2. The Doctor/nurse should indicate whether the patient is a Cardiac, Trauma or OB patient.
 - If the TEG sheet does not indicate patient type, please call the floor or look in beaker for confirmation so you know which cartridge to use.
3. A TEG order will be placed in beaker to be run on the TEG 5000.
4. Run the specimen on the TEG 5000. Please make sure QC is run as these results will be put into beaker and become part of the patient's chart.
5. Spin down 1 of the blue tops and perform a **FIBRINOGEN**. Record the fibrinogen result on the TEG 5000 print-out.
6. The floors have been asked to draw an extra Blue top tube. This tube should be run on both the teg 6S (Teg 1 and Teg 2)
 - Cardiac patients: Use the **Global Hemostasis (Citratd: K, KH, RT, FF)** (the box has a purple stripe)
 - Trauma and OB: Use the **Global Hemostasis Lysis (Citratd: K, RT, FF)** (the box has an orange stripe)
7. You will not need to run QC on the **TEG 6s**
8. Print out the Results (with patient information-name and MR#) from the TEG 5000 and put in the folder near the TEG 6s's. Someone will check the folder daily and collect the data.

If we receive a platelet Mapping order:

1. Run the Specimen on the TEG 5000.
2. Use one of the Blue top tubes for a **FIBRINOGEN**
3. Determine whether the patient is a cardiac(most likely) or Trauma patient.
 - Using the appropriate cartridge, run a TEG on both TEG 6s (blue top tube)
 - Using the platelet mapping cartridge, run the test using the Green top tube on both Teg 6s's
 - Print out all the TEG 5000 results (TEG, ADP, and AA) with the patient information and put in the folder with the TEG results near the Teg 6s

Specimen Procedure: (if you need to log-on the instrument, scan the card located on the side of teg 1)

1. Take the appropriate cartridges out of the refrigerator and allow to come to room temperature for 5-10 Minutes
2. From the main screen:



- a. Select
- b. Select the image with the + sign and click on next



3. Scan the barcode with the appropriate TEG scanner and click on confirm
4. Insert the cartridge
5. Verify you have the correct cartridge and click on Next
6. Under test information enter one of the following based on the specimen received: Cardiac, Trauma or OB
7. Click on Next
8. Load sample and press start test
9. When the test is finished, the analyzer will have a message "remove cartridge"- remove the cartridge and discard appropriately.