**HEMATOLOGY   
MINUTES**

**January 2025**

DATE: 1/8/2025

PRESENT:

**Day Shift**: Louise, Dan, Hiram, Emma, Faye,

**Evening Shift**: Kwame, Duc , Lisa, Fei

* **SCHEDULE:** 40 hours to begin on 1/12/2024 for Hematology and evening shift

**Day shift:**

* **Weekdays: 6:00-2:30 or 6:30-3:00(1tech)**

**7:00-3:30 (2 techs)**

**7:30-4:00 (2 techs)**

* **Weekends: 6:30-3:00**

**7:00-3:30 ( may change to 6:45-3:15)**

**Evening shift**

* **Weekdays: 3-11:30 except Kwame: 3:30**
* **Weekends: 3:00-11:30**

**\*\*\*\* PLEASE BE AT YOUR JOB STATION AT YOUR SCHEDULED TIME\*\*\*\***

**Overtime:** When OT is posted, Techs can sign up for 1 slot the first 5 days. Once the OT has been posted for 5 days, techs can sign up for as many open slots as they want.

* **UPDATES**
* **Liaison Plex:** New instrument for RVP panels. BH will be getting 2 instruments, each instrument can run up to 6 patients. A single, room temp, one step cartridge. More details to come.
* **EHP : Emergency Hemorrhagic Panel:** System wide panel being developed for patients that are hemorrhaging .
* Tests include PT/INR, Fibrinogen, HH, PLT count and Type and screen
* CS2500 instrument is set up so that the instrument will not perform the extended testing.
* Tentative go-live date is 2/18: more details to come.
* **SPGR refractometer:** Policy has been retired. No longer necessary to document SG QC on the p-drive.
* **FY2025 QA measures (Hematology)**

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| YNHHS | BH |
| CBC, PT/INR, UA ED TAT: <60 minutes 90% of the time | CBC, PT/INR, UA ED TAT: <60 minutes 90% of the time |
| Coag, heme and UA rejection rate < 3% | Coag rejection rate < 3% |
| IP Critical Calls ≤ 30 minutes 95% of the time | Critical calls properly communicated and documented 100% of the time |
| OP Critical calls ≤ 60 minutes 95% of the time | Corrected reports properly communicated and documented 100% of the time |
| Hematology 90% CBC (w/and w/o Diff) & PTINR Received by 6:45am and verified by 7:30am | Manually entered result audit |
| CSF gram stain TAT ≤ 60 min 90% of the time | ED Covid TAT ≤ 90minutes 90% of the time |
| RVP collections ≤ 1.% | ED 4Plex TAT ≤120 minutes 90% of the time |
| ED Covid TAT ≤ 90minutes 90% of the time |  |
| ED 4Plex TAT ≤120 minutes 90% of the time |  |

* **Reminders:**
* **Critical CBC call documentation:** All critical CBC calls must be documented using the COMM log within 30 minutes. Documenting in Caresphere is not the proper workflow.
* **Follow-up Worklists:** Please check the FUWL frequently to ensure you are calling result in a timely manner. Make sure that you actually look at the FUWL at the end of your shift, if you checked off that you checked the list. We have been finding results in the FUWL from all shifts.
* **Category A and B Shippiong:** training must be completed by 1/31/2025. Please print out the certificate and give it to Kathy. The link can be found: **P:\Laboratory\Hematology - BH 38020\LINKS and useful info (HEME LINKS)**
* **BSC and Centrifuge training:** If you have nor completed the hood and centrifuge training, please complete ASAP and no later than 1/31/2025
* **MD interps:** Please do your best to classify the WBCs on MD interps

Please print out patient CBC graphs from the Sysmex, not patient

reports from Epic.

* **Cancelling/redraw test and corrected results:** Try to avoid using “other” as a reason. If you must use it, then put the reason in the comment section.

* **Instrument issues:** Please document instrument issues (including reference # and resolutions) on the P-drive
* **Reagent changes:** Please document reagent changes in the appropriate file
* **Sysmex Reagents:** Document on instrument software. QC MUST be run with every reagent change regardless of lot#.
* **All other Instruments reagents:** Document on the P-drive in the appropriate file in the maintenance file. QC must be run on new lots of reagents.
* **Donning and Doffing:** All core lab employees will be trained in Donning and Doffing of PPE to be completed by 1/31/2025
* **Expiration Dates:** Please check expiration dates on all reagents and QC. This is everyone’s responsibility