

ASCLS VIRGINIA NEWSLETTER

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Summer 2025



Inside this issue:

ASCLS VA Spring Meeting
Recap

Presidents Message

A Lesson in Perseverance: A
Feature of Bushiri Salumu

A Clinical Investigation into a
Persistent Respiratory
Infection: A Microbiology Case
Study

ASCLS VA Spring Meeting Recap

by Ellie Coggins MSHA, MLS (ASCP)^{CM}

ASCLS-VA held its annual meeting on April 25th and 26th at Piedmont Virginia Community College in Charlottesville, VA. The meeting was sponsored by a generous grant from the Commonwealth Transfusion Foundation. We kicked off the festivities on Friday afternoon with a Student Quiz Bowl. Programs represented were Old Dominion University (the "Immunosnipers") Radford University ("Mycelium Romance") and Virginia Commonwealth University (the "Cell-ebrities").

continued on page 4



01/07

New Partnerships Formed



Presidents Message

by **Laura Link, MS, MLS (ASCP)^{CM}**

Hello ASCLS-VA!

I will start this message by tagging onto the finishing message from our spring meeting: We are the axle, and we keep things turning. I just want to remind you that you can reach out for help or advice at any time. It's okay if you want to pull over for a while, or put it in reverse, or change lanes. We need to make some noise, but you decide what YOU can do!

At the time of this writing, the ASCLS Joint Annual Meeting is taking place in Sacramento, CA. I am honored to have been a delegate representing us. Thanks to Ellie Coggins, Melissa Reeves, Nicole Parham, and Doryan Redding for also serving as delegates. I will provide information about the experience on the ASCLS Connect Community Virginia Constituent Society after the meeting.

And speaking of the ASCLS Connect Community – I'm going to be using this as a communication tool during the coming year. Please login and make sure you can find this valuable resource! Sign up for notifications, join the communities that appeal to you, connect with others in ASCLS. This is a great (free to use) resource for ASCLS members. Have you renewed your membership yet? I believe ASCLS is worth every penny – please get this done as soon as possible. Doing this before the membership year end on July 31st will also help ASCLS save some money as they won't have to send you reminders. And, we need to have everyone – there is work to do if we are going to keep things moving!

We are already planning for our next meeting in Richmond on April 10 – 11, 2026. Save the date!! Thank you for allowing me to serve as your state society president – it is an honor.

– Laura

Laura Link (llink1@radford.edu) is Program Director of the Medical Laboratory Science Program at Radford University

A Lesson in Perseverance

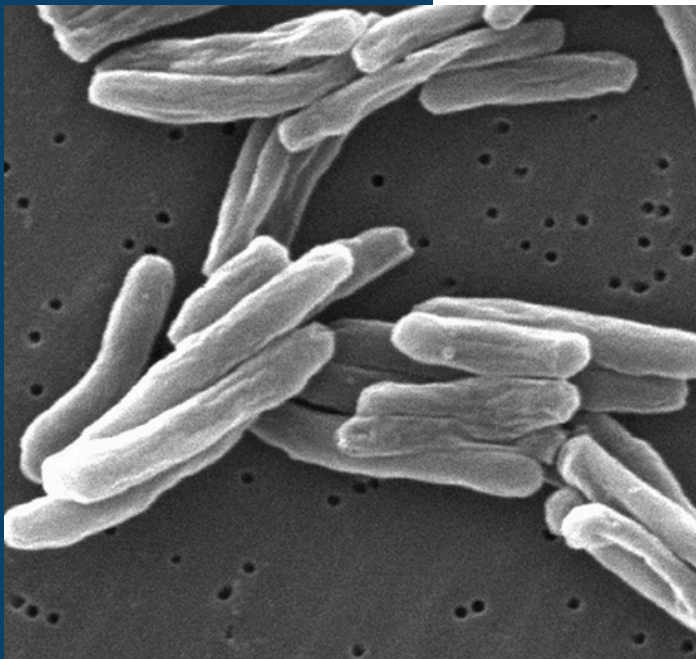
by **Patricia Rinald MS, MLS (ASCP), SBB**

I first encountered Bushiri Salumu in the spring of 2021 when I was asked to teach a phlebotomy course for PVCC Workforce Development. I was new to teaching Workforce students and had no idea how much post-secondary education, if any, the students had.

continued on page 5



Bushiri Salumu



A Clinical Investigation into a Persistent Respiratory Infection: A Microbiology Case Study

by Connie R Mahon MS, MLS (ASCP)

A 49-year-old white male reported to a clinic for a follow-up for bacterial pneumonia. The patient complained of coughing up blood, very green sputum, weakness, fatigue, and shortness of breath. On admission, his chest X-ray showed that he had chronic bullous lesions in the lungs, especially in the apical region.

The patient had a history of positive PPD and asbestos exposure. He worked with insecticides on a farm. The patient told the doctor of a drinking problem and also said that he smoked 3 to 4 packages of tobacco products a week. The patient denied night sweats or chills but had experienced slight weight loss. A bronchoscopy was performed. The initial diagnosis was *Mycobacterium tuberculosis*.

Laboratory results showed decreased hemoglobin and hematocrit and prolonged coagulation studies.

The patient received a total of 8 units of packed RBCs and fresh frozen plasma. The patient also developed a temperature of 101.7°F. His posttransfusion CBC brought his hematocrit to 30 percent and his hemoglobin to 10 g/dL. However, the patient's WBC dropped from $6.7 \times 10^9/L$ to $3.0 \times 10^9/L$. Transfusion of 2 units of packed RBCs per day maintained his hemoglobin at 11 g/dL. There was a continued low white count in spite of the repeated temperature spikes.

A second chest x-ray showed an infiltrate attributed to either mucus plugs or pleural effusion. Blood cultures using the Dupont Isolator system were obtained. A bone marrow tap was also performed. At this time, the patient's WBC was $1.8 \times 10^9/L$ and platelets were 21,000/mcL. His hemoglobin and hematocrit remained stable. The bone marrow, and blood cultures were sent to microbiology for culture and histologic studies.

continued on page 7

ASCLS VA Annual Spring Meeting Recap

CONTINUED FROM PAGE 1



The competition was fierce, but Virginia Commonwealth University came out on top and will get to take home the trophy until next year's competition when they will defend their title. First-runner up was Radford University with Old Dominion University hot on their heels. The students all displayed a breadth of knowledge that was impressive to see.

On Friday evening many attendees gathered to enjoy dinner at Three Notch'd Brewing at the IX Art Park. Several also attended The Looking Glass interactive art exhibit. We filled four tables with lively conversation and enough seat switching to make our server regret being assigned to our section.

On Saturday morning the meeting began with a hearty breakfast followed by an opening keynote from Dr. Liz Culler of Blood Assurance where we learned about trends in advanced therapies and the impact that they could have on blood banks and blood centers. Following the keynote, attendees had the opportunity to earn four hours of CE from the eight sessions offered. Speakers joined us from ARUP Laboratories, VCU Health System, Sentara Health, UVA Health, George Washington University, Radford University, and the Virginia-Maryland College of Veterinary Medicine to speak on a variety of topics.

Throughout the day attendees had the opportunity to stop in for snacks and a boxed lunch while visiting with potential employers, purveyors of supplies and reagents, and other laboratory-related companies and organizations. Please check out the vendors that supported our meeting and send them your thanks!

While eating a delicious lunch, attendees were invited to attend the ASCLS-VA board meeting. The meeting included a Government Affairs report where we learned how ASCLS is advocating for our profession in Washington, DC and reports from the Treasurer and Marketing & Communications Committee.

Next, we held elections for open board positions for Secretary and President Elect. There was one candidate for each position and hearing none opposed, Krystina Angelini was elected Secretary and Ellie Coggins was elected President Elect. Last, but not least, we also recognized the ASCLS-VA Member of the Year, Krystina Angelini! Congratulations, Krystina and thank you so much for your hard work and dedication to the Society.

continued on page 5



ASCLS VA Spring Meeting Recap

CONTINUED FROM PAGE 4

To end the conference, ASCLS-VA President Laura Link gave a moving closing keynote which “helped participants see opportunities for professional advocacy and strategies to mobilize support for changes.” Laura used her rare skillset to simultaneously use a car axle metaphor (effectively!) and yet still make us cry with the impact she has personally felt and that we should all feel about the importance of the work we do.

If you were able to attend the meeting, I hope this recap has brought back memories of the wonderful weekend that we had. If you were not able to attend, I hope it has inspired you to join us for our next annual meeting which will be held at Virginia Commonwealth University (Richmond, VA) in the Spring of 2026!

Ellie Coggins (elliecoggins@gmail.com) is the Laboratory & Medical Clinic Manager at Western State Hospital in Staunton, VA.



Thank you to our Vendors

Blood Assurance
Diasorin
Eurotrol
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Sentara Health
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UVA Health
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Commonwealth Transfusion Foundation – Meeting Sponsor



A LESSON IN PERSEVERANCE

CONTINUED FROM PAGE 2

What I didn't know at the time and only learned recently, was that Bushiri was from the Democratic Republic of The Congo. He had come to the United States after fleeing his country. As a teenager, he had plans to study medicine like his father. Tragedy struck when his family and friends were brutally attacked. Bushiri and some of his siblings survived and managed to escape to a refugee camp. Recovery would be a long process as Bushiri had to learn how to speak again.

After several years, Bushiri was selected for resettlement in the United States and came to Charlottesville to start his new life. After a few months, he enrolled in English classes and eventually received his GED diploma. He then modified his goal of studying medicine and decided to focus on nursing or medical laboratory technology.

He first enrolled in a CNA class and worked at UVA Children's Hospital for a year. He then enrolled in the phlebotomy course, which is where we met. In the end, he did well in phlebotomy and passed his certification exam. He received a position in 2021 at UVA Health as a phlebotomist.

About a year later, PVCC started an MLT program and hired me to be the program director. As part of my recruitment efforts, I gave a couple of spotlight presentations to UVA Health workers during lab week of 2023. Bushiri attended one of the sessions, but did not say whether he was interested in MLA or MLT. That summer, I offered our introductory course and Bushiri enrolled. It was at that time he indicated he intended to apply to our second MLT cohort.

Since his official start in the program, he has worked hard to understand all that has been taught. English remains a challenge at times, but the bigger challenge is managing multiple jobs while completing his studies.

Bushiri is approaching the conclusion to this part of his journey. He will graduate at the end of the summer with an Associate of Applied Science Degree in Medical Laboratory Technology. He has also received a work grant scholarship from UVA labs, which means he has a job waiting for him.

Looking to the future, Bushiri intends to work for at least a year before pursuing a BS in medical laboratory science. Where the next leg of the journey will take him is unknown, but his storying is truly inspiring, and I am fortunate to have been a part of it.

Trish Rinald (PRinald@pvcc.edu) MS
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BE A VOICE UNITED!

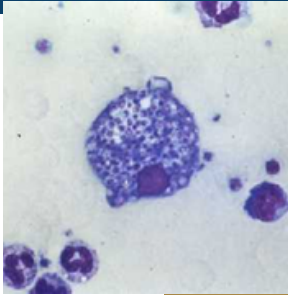
LABVOCATE 2025
ASCLS Legislative Symposium
October 20-21, 2025

Hilton Alexandria Old Towne Alexandria, VA
www.ascls.org/labvocate-symposium/

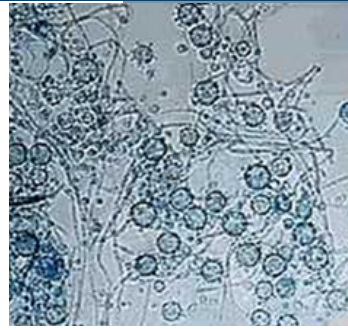
06/07

A Clinical Investigation into a Persistent Respiratory Infection: A Microbiology Case Study

CONTINUED FROM PAGE 3



Smear from bone marrow stained with Giemsa



LPCB prep of bone marrow fungal culture grown at room temperature.

After reviewing the patient's clinical history and evaluating the images, here are questions to consider:

- What factors in his medical and work history predisposed him to his condition?
- Are any of the laboratory test results outside the usual acceptable limits?
- How do these test results correlate with the patient's clinical presentation?
- What do the bone marrow aspirate and the fungal culture grown at room temperature results indicate?

The bone marrow studies revealed lymphohistiocytic aggregates with intracellular organisms. Seven days after the bone marrow was obtained, the fungal culture grew white, cottony colonies on Sabouraud dextrose agar at room temperature. Blood cultures from the Isolator and bronchial washings grew the same. At 37°C, the fungus demonstrated the yeast form on brain-heart infusion. The isolate was identified as *Histoplasma capsulatum*. The patient did not respond to therapy with amphotericin B. He developed bacterial septicemia and disseminated intravascular coagulation. The patient expired 6 weeks from the day of admission.

H. capsulatum is found primarily in the environment, especially in soil that is enriched with nitrogen. The organisms are acquired by inhaling the microconidia. Therefore, the lungs become the primary site of infection. Although most individuals are asymptomatic, bronchial irritation and pneumonitis may occur, and the host may experience a flulike syndrome. The organisms are readily engulfed by local histiocytes but are able to multiply intracellularly. In immunocompetent individuals, the organisms are cleared by the reticuloendothelial system. However, in immunosuppressed and immunocompromised hosts, such as the patient in this case, the infection may manifest as a respiratory illness but may also disseminate hematogenously. His history of alcohol abuse, smoking, and exposure to asbestos and harmful chemicals that may have been present in insecticides may be considered as risk factors for respiratory illnesses. The positive PPD indicated past exposure to *Mycobacterium tuberculosis*. Given the patient's risk factors, he was highly susceptible to an opportunist such as *H. capsulatum*.

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