

## **NEWSLINKS**

**JULY/AUGUST 2018** 

AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE - MICHIGAN

**VOLUME 30 NUMBER 4** 



# President's Message Lindsy Hengesbach

### What do Whales have to do with my Work?

During my presidential term, I took the opportunity to learn as much as I could about leadership. I read Simon Sinek's "Start with Why," I went to Zing Training (the leadership strategy used by the world famous Zingerman's Bakery), I talked to my mentors and even reached out to Dr. Tim (if you were in band you know who this is!).



But the thing that I found most useful was a short book and a killer whale. Yes, I said killer whale.

When it comes right down to it, relationships of all sorts just work better when you accentuate the positive. This is what the author of "Whale Done! The Power of Positive Relationships" emphasizes. This book started with Jim Ballard having a tough time getting people to do what he wanted at work and at home (yes, I tested the theory in this book on my kids, it worked and please don't tell them!). He was on sabbatical and found time for a quick trip to Sea World. While watching Shamu, he wondered how the trainers could get a killer whale to perform thinking maybe he could take that information back to his workplace. The answer was not what he thought. In fact, it was much simpler than he thought. Turns out it was as simple as ABC.

Trainers were able get killer whales to perform because they followed this training model:

### A-the Activator

This is what triggers the performance. For the whales it was a hand gesture, but for people in the workplace the most common activator is a clear, attainable goal. Setting clear, attainable goals motivates the performance you want. Turns out video games motivate my kid.

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### **B-the Behavior**

The behavior is what was observed. For killer whales this might mean jumping through a hoop. For us lab folks it might mean performing a complex protocol or analyzing QC data. For my kids it means doing their homework before playing a video game or emptying the dishwasher before watching TV.

### C-the Consequence

This is what happens after the behavior is observed. It is the most important step and it is the least utilized. There are four main consequences: no response, a negative response, redirection and a positive response. Funny thing is most of us experience the first two most frequently in our day-to-day lives. Guess what? They are the least effective. Turns out if we catch someone behaving in the way we want, giving positive feedback will reinforce this behavior. Hopefully all my lab science friends out there are thinking of Pavlov or at least the Big Bang Theory episode where Sheldon rewards Penny with chocolate every time she does something he likes!

So now you have the basic tools to get your kids to do their homework or maybe get a co-worker to pick up after themselves. But you are wondering what happens when someone is constantly doing something wrong. We simply redirect. Start by describing the error as soon as possible, clearly and without blame. Show its negative impact and if appropriate take the blame for not making the task clear. Go over the task in detail and seek understanding from the other party. Finally, express your confidence in the other person. Expressing confidence in others builds trust. Essentially give them another task to do until they get something right. And eventually, they will get something right.

And when they do get it right, mind you it doesn't have to be perfect, make sure to give praise immediately and be specific about what was done right. Also encourage them to keep up the good work. Finally make sure it's sincere and honest – otherwise it kind of defeats the purpose. Emphasizing the positive and redirecting the negative bolster relationships instead of damaging them.



### ASCLS-Michigan Newslinks

A bi-monthly publication of the American Society for Clinical Laboratory Science - Michigan. Deadlines for articles are the 20th of Feb, Apr, Jun, Aug, Oct, & Dec. Articles must have name of author. Anonymous letters will not be published. The editor reserves the right to edit all materials submitted for publication. Articles appearing in *Newslinks* represent the opinion of the author and may not represent the opinion of the society.

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### **Self-Sufficient or Team Player?**

Barb Mannor, Scientific Assembly

A Medical Laboratory Science candidate must possess the ability to work quickly, carefully and be self-sufficient. This is not a complete description of what it takes to be a successful MLS/MLT but it is a good start. Many MLS programs look to foster these qualities in their students and employers require them of their employees. Quick, careful, and self-sufficient are core principles that the clinical laboratory was founded on. While fast turn-around times and accurate results are always going to be a priority of diagnostic testing, being self-sufficient has become increasingly difficult. With the shift of specimen collection outside the hospital lab, it could be argued that being a team player is more important than being self-sufficient.

Historically, blood collection for the purpose of diagnostic testing within the hospital has been the domain of the laboratory. First it was MLS/MLT and phlebotomists performing all of the phlebotomy, but over the last ten years this has increasingly become a shared responsibility with Nursing. Because of the difficulty in getting the specimens collected on time due to the reduction of phlebotomy staffing, many in the laboratory thought this was a good idea until they realized that they no longer have the same control over specimen quality. If a lab employee collects a bad specimen, a laboratory supervisor is able to provide the appropriate education and counseling to correct the problem. When nursing staff requires this type of intervention, the laboratory must rely on the managers of another department to understand the issue and correct the situation.

Looking on the internet I found many other laboratories are facing or have had to face this same issue. In *CAP Today* from February 2001, an article "Back to the Drawing Board. Hospitals Rethink Their Phlebotomy Staffing Practices", provided a discussion and examples of Nursing-directed phlebotomy. In

*CAP Today* May 2018 issue, an article "With Hemolysis, Tackling the Rush with the Reasoning", I find we are still dealing with all the same issues of specimen integrity as we did in 2001.

From my own experience working with phlebotomy and nursing personnel in my institution, I know it requires continual education and reinforcement of skills. Since the lab knows rejecting all short draws or tubes with crooked labels will cause a delay for the patient, MLS/MLT staff try to do the manual manipulation required to provide a result. However, the issue then needs to be addressed with the ER manager who can present it at their daily huddle. Emphasizing how important and more efficient it is if all of the labels have their own collection tube has been another issue we have tried to work on.

Since it became obvious in our hospital lab, that Nursing would be doing more of the blood collections, we met with the manager of our Emergency Department and the Nurse Educator and put in place a lab orientation for all new ER staff. They have to come to the lab for a half day as part of their orientation. A Senior Lab assistant gives them a tour of the lab. She points out how the robotic line works and at this time points out the importance of the amount of sample as





well as the placement of the label and order of draw. They review proper blood culture collection and of most importance the correct identification of the patient. We try to create a friendly environment and encourage them to ask any questions they have during this time in the lab or when they get on the job. We provide them the opportunity to see a phlebotomist perform a blood collection and they are able to practice if they so desire.

We have been doing this for three years. Besides the orientation we need to continually reinforce proper phlebotomy techniques. We did institute the one patient per bag policy which was a suggestion of the ER management team. This one policy has prevented many possible patient identification errors since one label from another patient would be among all the other tubes with labels from another patient. This policy has resulted in an improvement in identification errors. The ER staff no longer argues with the lab staff regarding this issue since their managers are the sole reason for this policy.

How can the MLS/MLT staff member help with this process? Be patient and offer a simple explanation of why the specimen was rejected. We still get a few accusations of using the lab "hemolyzer" but with our new education program and the support of the ER

management team, we have not heard that for several months.

Patient satisfaction scores are very important to an institution. When the lab is able to help Nursing get the quality specimen the first stick, the patient is much happier and this is reflected in the survey scores. Other ways to improve communication between other care givers is by asking what ideas they have to help them obtain quality specimens. Develop a trust between the different work units. If everyone remembers that the welfare of the patient is the major focus, we can work together to accomplish that goal. We need highly skilled MLS/MLT staff with good communication skills and the ability to work as a team member with other health care professionals.

Look for ways to educate the Nursing staff even if your lab does not have a formal program in place. Articles in the institution's employee newsletter regarding blood collection as well as posters to be displayed in the Nursing staff break rooms are a few other ideas that we have tired. Collaboration between all members of the health care team will be needed to meet the ever changing technology which will include Point of Care testing and the best way to provide diagnostic testing with the present funding of health care.

# Lifetime Achievement Award 2018: Linda Goossen





L-R: Linda Goossen, Lindsy Hengesbach

Linda Goossen was selected for the 2018 Lifetime Achievement Award which was presented at the annual meeting in Plymouth last April. Congratulations, Linda! She has an impressive list of ASCLS involvement, educational experiences, awards, publications, presentations, and volunteer activities in her CV letter, which was 20 pages long! Her nomination letter shows her impact on the profession below:

"I have been lucky enough to know Linda Goossen for the past 14 years, probably the most important and formative years of my medical laboratory science career. I met Linda as a student in my first year of ASCLS involvement, in Washington DC of all places. It was my first of many legislative days with ASCLS and was touring the national mall after meeting with legislative officials. Even though we had never met, Linda recognized that I was a student member of MSCLS and immediately introduced herself asking if we could see the sights together. With her easygoing personality, happy demeanor, and helpful nature, she immediately made me feel comfortable and welcome into the organization. Thanks to my conversations with Linda that afternoon, I left DC inspired, motivated, and ready for a lifetime

of professional involvement with ASCLS. Little did I know at the time that Linda was one of the best professionals in ASCLS-MI I could have possibly met and she would go on to become one of my closest personal and professional mentors in my life.

It is impossible to sum up Linda's lifetime of achievements, accomplishments, and well deserved accolades without making her cry, in the short time we have here today. Her CV is a mile long and the number of people's lives she has touched is insurmountable.

Linda is the most selfless and caring person I have ever met; she is a shining example of what a MLS professional should be. After working the physician office sector, she has spent her career teaching and motivating countless students to be the best laboratory professionals they can be. As state board of director's member for many years, she has inspired many professional members to become more involved in the organization and the profession as a whole. At the regional level, Linda has been our regions

treasurer for multiple terms. Her love of numbers and accounting has kept us financially sound for years. Nationally she has been involved in our organizations many legislative efforts and as our government affairs chair she promotes activism in our field. Together we have given many presentations together across the country and with every presentation we do, she leads by example and I always learn something new from her whether it be about the subject matter we are presenting on, how to become a better professional, or how to become a better person.

She has inspired my love for education and teaching and I am so grateful for all Linda has done for me and others in our profession. If I could accomplish even half of what she has achieved in her lifetime, I will be doing well. Congratulations Linda on your amazing career, lifetime of involvement with ASCLS, and just being a wonderful person, instrumental in so many lives; I can't wait to see what you accomplish next!"

# **In Memoriam - Kay Paff**

ASCLS-MI lost a long-time member, leader, and friend with the unexpected death of Kay Paff on May 25. Kay was returning from a vacation in Mexico when she experienced a severe infection. Her obituary is available at <a href="http://">http://</a> www.palmerbush.com/obituary/kathleen-tuttlepaff

Kay had been a member of ASCLS since 1982 (36 years!!!). Kay was the educational Program Director at St. Lawrence Hospital in Lansing. When they gave up their accreditation to affiliate with Michigan State, Kay continued with the clinical coordinator responsibilities. Eventually, they stopped taking students. Kay moved to the Program Director position at Kellogg Community College in Battle Creek. When the program was threatened with closure due to low enrollments, Kay really beat the bushes in southwest Michigan, developing relationships with high schools and other colleges that rejuvenated her student numbers. She worked with local employers to develop a fast-track program for biology BS grads to help them gain certification while employed. As many will remember, the KCC students under her direction were regular winners of the ASCLS-

MI mock certification competition. Kay was honored by ASCLS-MI with the 2001 Donna Duberg Mentorship Award and the 2012 Member of the Year Award. Kay had retired from KCC some years ago. Although she had a chronic illness, she enjoyed many good times with family in her retirement and was very active in her church.



L-R: Kay Paff receiving 2012 ASCLS Member of Year Award with Andrea Hickey

### 2018 Annual Meeting Awards Ceremony - Part 2

Editors note: Many thanks to awards chair Lindsey Foos for all of her work in making this year's awards ceremony a great success. I am also grateful to Ric Benson for photography. Look for additional awards, including the Lifetime Achievement Award in the next edition of Newslinks.



### JOSEPH MILLER MEMORIAL AWARD

The Joseph A. Miller Memorial Award presents a scholarship to an outstanding Medical Laboratory Science student each year. This award was created to honor and remember a vendor who died in an automobile accident after attending our annual meeting.

Congratulations to the 2018 Joseph A. Miller Memorial Award winner **Anne Kloosterman**. Anne is a member of the 2018 MLS class from Grand Valley State University. The award is offered by the ASCLS-MI in memory of Joseph Miller to an outstanding Michigan Medical Laboratory Science student. The Awards committee presented a plaque and a check for \$300.00 to Anne.



### MARTHA ROULUND MEMBERSHIP AWARD

The Martha Roulund Membership Award was created by ASCLS-MI to honor our long time Executive Secretary Martha Roulund. Martha served ASCLS for over 50 years. This award gives first-year professional membership in ASCLS-MI to a student who shows great potential to contribute to the profession and our professional society. This year's award winner is **Darby Naheedy**. Her nomination letter explains:

"Darby is a shining example of a student who has shown great promise to make significant contributions to the profession and to the organization, and I can think of no other more deserving candidate for this award. She has taken on her recent role as ASCLS-Michigan Student Forum Chair with much enthusiasm, and has already made an extremely positive impression on the Board. She has attended and actively participated in the Board meetings throughout her term thus far, and her efforts coordinating the student video competition, including but limited to drafting rules, application forms, judging criteria, and creating stunning visual advertising are just one example of the dedication she has shown to the organization."

### **OMICRON SIGMA AWARDS**

The Omicron Sigma award is given at the state, regional and national level.

It recognizes individuals who volunteer their personal resources, time and energy in to the Society.



Omicron Sigma - State Level (L-R): Michelle Russell, Carey Loveland, Ric Benson

Not Pictured: Mattie Kropf, Ninive Costa, Shawn Videan, Lindsey Foos, Mariane Wolfe

### Omicron Sigma - Region IV Level (L-R):

Kristina Martin, Romina Selzer, Daniel DeRegnier.

Not Pictured: Lindsy Hengesbach, Sarah Witcher, Rachel Morris, Leticia San Diego, Kathleen Hoag, Suzanne Butch



### Omicron Sigma - National Level (L-R):

Kathy Doig, Kristin Landis-Piwowar, Stephanie Rink, Roslyn Mcqueen

Not Pictured: Andrea Hickey, Linda Goossen



### **MOCK CERTIFICATION EXAM**

One of the highlights of the Awards Ceremony is the announcing of the winners of the **Mock Certification Exam Competition**. Students take this 100 question comprehensive exam in a proctored setting, first individually and later as a team. Many thanks for Mariane Wolfe and any other volunteers who made this event happen.

A total of 147 individuals and 33 teams participated in the 2018 ASCLS-MI Mock Exam Event.

### **Individual Winners:**

First Place: Nic Tobin-Wayne State University (photo at left below)

Second Place: Justin McMurray-Eastern Michigan University (photo at center below)

Third Place: Ty Grancitelli-Grand Valley State University (photo at right below)











### **Teams Winners, MLS:**

First Place: Eastern Michigan University Team A – (L-R above)

Rasma Rudnickaite, Samantha Keller, Rachael Powers Justin McMurray

Second Place: St. John Providence School of Medical Technology Team D – (not pictured)

Yonisha Harris, Tahlia Rosales, Kaylen Poppe, Katherine Turner

Third Place: Wayne State University Team 3 – (not pictured)

Annie Zhang, Nic Tobin, Alyson Pfahl, Reem Alawdi, Ali Fateha

### Congratulations to all the participants and programs!

### STUDENT FORUM SCHOLARSHIP

The Student Forum Scholarship winner is **Anne Kloosterman** from Grand Valley State University. Her nomination letter explains:

"Anne not only has strong academic potential, but she is also a humble, kind, and generous classmate. I feel she is a good ambassador for GVSU and is deserving of one of these awards available through ASCLS-MI. I expect continued quality work and success from her. I believe she will become a valuable asset to the profession after she graduates."



### POSTER COMPETITION

This year's poster competition was both exciting and educational. A panel of expert judges chose the top three posters from the many excellent offerings. The winners and the topics of their posters are listed below. Many thanks to Kay Castillo for coordinating the event and judges for their time evaluating the presentations.

### **Undergraduate Poster Contest Winners:**

### **First Place:**

Julianne Nakamura (pictured at right) Eastern Michigan University "Current Trends in Blood Culture Contamination"

### **Second Place:**

Allaire Schneider Grand Valley State University "Standardizing the Cell Drop Method to Improve Chromosome Spreads"

### **Third Place:**

Erin Mulder Grand Valley State University "Improving Parameters for Urinalysis with Reflex to Culture"



### **Graduate Poster Contest Winners:**

### **First Place:**

Katelyn Praedel and Demi Stanton (pictured L-R at right) Hurley Medical Center School of Medical Technology

"Contact Killing Copper as an Antimicrobial Surface in Controlled and Uncontrolled Hospital Settings"

### **Second Place:**

Rachel Welch and Christina Woodward – Hurley Medical Center School of Medical Technology

"Correlation Between Positive Influenza Tests and Troponin Levels During Flu and Non-Flu Seasons"

### Third Place:

Matthew Persails and Lauren Davis Hurley Medical Center School of Medical Technology

"Blood Alcohol Levels in Individuals with Cobalt-Based Surgical Implants"







### **Another Great Legislative Symposium**

Lindsy Hengesbach

In March several ASCLS-Michigan members took the opportunity to advocate for our group in Washington, D.C. at the ASCLS Legislative Symposium. This year the focus again turned to the Protecting Access to Medicare Act (PAMA) and we took a new approach to work force shortages.

Last year, under PAMA, the Clinical Laboratory Fee Schedule (CLFS) was cut based on inaccurate data. Based on my understanding, the way that the average fee for the schedule was calculated used large reference labs like ARUP and LabCorp and only included some of the largest health care systems where costs are low. It did not include large, midsize, small rural hospitals or doctor's offices in the calculations. This skewed the data. We know that big reference labs can cut costs through volume but that isn't going to be apparent to our legislators. In addition to this, the data collection process was complex and confusing which may have lead to additional errors.

Why is the CLFS so important? Not only do public welfare programs like Medicare and Medicaid use these numbers to set reimbursement rates, the insurance companies use them as a reference point too. If we as laboratorians are going to keep our jobs, we need to help our legislators realize that these cuts will prevent access to health care not protect it. These cuts will make it harder for small hospitals to perform even the most basic tests inhouse. These cuts will cause delays in treatment because lab tests will be sent out to big conglomerates instead of being done in-house. I encourage you to think of what would happen to our patients if we couldn't do something simple like grow a culture from an infected wound or perform a differential on a blood smear. How much extra time would they have to wait for their results? What impact would it have on their care?

We also discussed work force shortages and tried to tie it back to better service for our veterans that are using Veteran's Affairs (VA) services for medical care. In recent years, the VA's health system has gotten a bad reputation. Long delays in treatment, administrative issues and staff shortages have plagued the VA for years. President Trump has decided to put federal funding toward fixing these issues. Some of this money has been set aside to be put toward education and training of new health care professionals and that's where we came in. We argued that we are a skilled occupation and that the workforce shortage decreases access to laboratory services, thus decreasing the quality of patient care. We also pointed out that decreased laboratory staffing leads to delays in test results which leads to longer hospital stays and increased costs.

The take home message we relayed to our Senators and Representatives:

The CLFS cuts in PAMA only provide short term budget relief. Healthcare costs will increase in the long term.

Cuts can be made if data collection methodologies are accurate and truly represent all types of laboratories.

The data collection process needs to be simplified.

Use VA funding to support Medical Laboratory Science and Technician Educational Programs

If just one person that reads this takes this information and reaches out to their Representative and Senator, we might get the support we need to make a change. You don't have to go to Washington. Start with a short email or a phone call. Try going to their office here in Michigan. Be persistent. All you second shifters and third shifters out there unite and take a field trip to Senator Stabenow's Office or Gary's Peter's office. Don't worry about political affiliations. It's not about left or right; red or blue; conservative or liberal. It's about keeping our jobs and having a profession for years to come.



ASCLS-Michigan delegation with US Senator Debbie Stabenow



Dear Lindsy,

Thank you for contacting me about Medicare reimbursement for clinical laboratory testing. I share your concerns.

Clinical laboratory testing helps doctors effectively treat patients and is critical to the diagnosis and management of chronic conditions like diabetes, cancer, and heart disease. As you know, at the beginning of 2018, the Centers for Medicare and Medicaid Services (CMS) began to implement cuts to Medicare reimbursement for laboratory tests and services. I oppose these cuts and have fought to protect access to affordable clinical laboratory testing services. Please be assured if this issue comes before me for a vote in the Senate, I will keep your views in mind.

Thank you again for contacting me. Please continue to keep me informed about issues of concern to you and your family.

Sincerely

Debbie Stabenow United States Senator

Letter from US Senator Debbie Stabenow



### **HISTORY: The First National Conference of ASCLS**

### **Kathy Doig**

ASCLS, then the American Society of Clinical Laboratory Technicians, was founded in 1932 and held its first national conference in 1933 in Atlantic City, NJ. There were governance sessions and a meeting of the board of directors. There were social events, like a banquet. And there were the scientific sessions. Even a glance at the sessions listed below shows that our interests and concerns have not changed all that much, though the technology and science certainly have. There were professional issue sessions on Monday, moderated by Sister M. Joan. Then began the scientific sessions on Tuesday, some with titles that could be applied to sessions at our conferences these days!

### MONDAY AFTERNOON, JUNE 10, 2 to 5 P. M.

### GENERAL PROBLEMS OF TECHNICIANS

Presiding, Sister M. Joan, R.S.M.

- Summary of Returns from Questionnaire. By Sr. M. Joan of Arc, Mercy Hospital, Baltimore, Md.
- Problems of Laboratory Work and Administration as They Affect the Technician.
   By Dr. Phillip Hillkowitz, Denver, Colorado.
- 3. Technician's Status and Place in the Hospital, By Dr. Asher Yaguda, Beth Isreal Hospital, Newark, N. J.
- Keeping Abreast of the Times.
   By Sr. Alma Le Duc, St. Thomas Hospital, Akron, Ohio.
- Problems of the Technician in a Small Laboratory.
   By Myra Effinger, Altoona Hospital, Altoona, Penn.

### TUESDAY MORNING. JUNE 11. 9 to 12 A. M.

### HEMATOLOGY

Presiding, Frieda Ward

- Hemoglobin Estimations.
   By Dr. Russell L. Haden, Cleveland Clinic, Cleveland, Ohio.
- Laboratory Diagnosis of Leukemic States.
   By Dr. Roy R. Kracke, Emory University, Emory, Georgia.
- Aplastic Anemia, with Recovery and Follow-Up of Two and One-Half Years.
   By Bessie B. Morris, St. Vincent's Hospital, Staten Island.

New York.

- 4. Clotting Indices: Theory and Technic.

  By Lena A. Lewis, Lancaster General Hospital, Lancaster,

  Penn.
- Laboratory Procedures Involved in Transfusions.
   By Henrietta Lyle, St. Joseph's Hospital, Lancaster, Penn.
- 6. Cytology of Spinal Fluids,
  By Phyllis Stanley, Presbyterian Hospital, Newark, N. J.
  Round Table Discussion opened by Cecil Gowen.

### WEDNESDAY MORNING, JUNE 12, 9 to 12 A. M.

### BACTERIOLOGY

Presiding, Sister Alma Le Duc

- Allergic Technic in the Laboratory.
   By Dr. Warren T. Vaughan, Richmond, Va.
- Examination of Clinical Material for Tubercle Bacilli.
   By Frieda Ward, St. Barnabus Hospital, New Brunswick, N. J.
- 3. Laboratory Studies in Chronic Arthritis. By Cecil Gowen, Newark, N. J.
- Pathogenic Fungi: Studies from Two Fatal Cases.
   By Fanny Warnock, The Burnham City Hospital, Champaign, Ill.
- Laboratory Studies in Dysentery Epidemic Due to Atypical Flexner Organism.
   By Margaret Kirby, Medical Center, Jersey City, N. J.

Round Table Discussion opened by Vivian Herrick.

### **History of Society Names**

- 1932: American Society of Clinical Laboratory Technicians (ASCLT)
- 1936: American Society of Medical Technologists (ASMT)
- 1973: American Society for Medical Technology (ASMT)
- 1993 to present: American Society for Clinical Laboratory Science (ASCLS)

### **History of Society Headquarters Cities**

- 1935: Ann Arbor, Michigan (association incorporated in Michigan)
- 1949: Bellaire, Texas (near Houston)
- 1986: Bethesda, Maryland/ Washington D.C.

American Society for Clinical Laboratory Science MICHIGAN



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Moving? Please forward new address to the *Newslinks* Editor





# MARK YOUR CALENDARS ASCLS-MICHIGAN ANNUAL MEETING & EXHIBITS APRIL 10-12, 2019 KELLOGG HOTEL & CONFERENCE CENTER, MICHIGAN STATE UNIVERSITY, EAST LANSING IT'S IN YOUR BLOOD!