SCSCLS
The Palmetto Probe
Winter 2021

WE'RE BACK

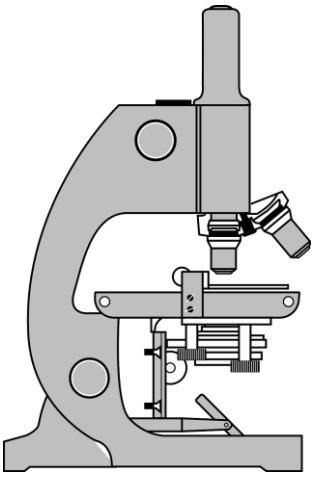
After nearly a decade since the last board was elected for the South Carolina Society for Clinical Laboratory Science (SCSCLS), we are back. The Palmetto Probe was last published in the Fall of 2008 and this is the first issue of its resurrection. Your new board has been elected and is listed on page 2 of this newsletter. We hope you enjoy the many exciting recent changes as we work to revive communication and value to your membership.

TIME TO STAND

-Brandy Gunsolus, DCLS, MLS(ASCP)CM

Over the previous several months, many of us have faced challenges. Our profession is long known to attract introverts, but we also attract survivors. We

FINISH READING ON PG. 2



THE VALUE OF PATIENT HISTORY

As medical laboratory professionals, we've been trained to deliver the highest quality results. We know when to question sample and reagent integrity.

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Upcoming Events:

SCSCLS Board Meeting,
February 9th, 5pm
Virtual via Zoom

CLEC, February 25th-27th
Virtual via Zoom

SCSCLS Board Meeting,
March 9th, 5pm
Virtual via Zoom

AL-GA-SC 2021 Virtual Medical Laboratory Symposium,
April 9th-10th
Virtual via Zoom

ASCLS/AGT/SAFMLS Joint Annual Meeting,
June 27th - July 1st
Louisville, KY

WHY TRAVEL?

In the beginning of 2020, I made a bold choice to change my career. I decided to quit my permanent job and become a travel medical laboratory scientist. I had been a bench tech for 3 years. I had been in Florida my entire life and …

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CNBC.COM

LETTERS TO THE EDITOR

Recognizing the lab professionals

April 19-25 is Medical Laboratory Professionals Week and what better time to recognize the people who perform laboratory tests which provide the information our clinical colleagues use to diagnose, monitor and treat patients.

The importance of widespread testing has become apparent to all who are managing the COVID-19 pandemic. The drive-through test sites are actually specimen collection sites where nasal swabs are collected. Current testing for the coronavirus occurs in hospital, reference and public health laboratories which have the expertise and equipment to perform the very complex molecular biology techniques.

The people performing these tests are medical laboratory scientists and technicians who have college degrees and professional certification (and in some states, licensure). Laboratory leadership is provided by MD pathologists, doctoral scientists and laboratory professionals with advanced degrees.

The shortages experienced by front-line healthcare workers are also felt by laboratory personnel. This includes not only the PPE but also reagents, supplies and equipment used for specimen collection and transport, and the coronavirus test itself.

Tests are being developed for coronavirus antibodies which are typically an indication the person has recovered from the virus. The antibody test is more straight-forward and will likely be performed in more laboratories using equipment they already have.

Early detection of infection in the population, tracing contacts and an indication of recovery from the virus are keys to lifting the current restrictions on businesses and individuals.

Healthcare professionals are receiving recognition and praise for their dedication in the extremely stressful conditions of the pandemic. Medical laboratory professionals are an essential part of the healthcare team. They deserve your thanks as well.

Toni Okada, MLS, DLM (ASCP)cm, retired
Mercer Island

Medical laboratory scientists working hard

I am a medical laboratory scientist and educator and am proud of what both of these roles serve. Medical laboratory scientists conduct a multitude of testing procedures, including routine urine and blood tests as well as specialized virus and pathogen testing.

As you read about parking lot testing centers, understand that these are actually collection centers. Collection centers are staffed with qualified and trained health professionals, including doctors, and unknown medical laboratory scientist. Within a standard hospital lab, we are crossmatching blood for transfusion, performing tests to detect cancer, and identifying bacteria and viruses that are causing infections. To be a medical laboratory scientist, one must have a bachelor's degree, pass a national certifying exam, and perform annual competencies.

During regular and pandemic times, we are all proud to serve as an integral part of health care

invaluable role, this letter seeks to identify the often overlooked

Sonya Hidalgo
Lake Charles

STAND UP

SAY SOMETHING

Forbes

Beating Pandemics Like COVID-19 Requires More Medical Laboratory Professionals, This Virologist Explains

have now survived extreme labor shortages, extreme supply shortages, extreme PPE shortages, extreme blood shortages, and more. We are survivors because we always find a way; a way to get the patient their test result, a way to find blood for them, a way to "make it work". But with the unprecendented pandemic, how long can we keep this up?

I have seen many laboratory professionals over the years complain about the laboratory labor shortage, or overall low pay, or lack of respect. This pandemic has shown a spot-light on our profession unlike any in recent memory. We have an opportunity to make the public know who we are and use this time to improve the profession for all.

So I challenge each and every one of you. Stand up and say something. You can write a letter to your local newspaper or news media about medical laboratory professionals. You can promote the profession at a local elementary, middle, or high school. You can write your congressmen regarding laws and regulations affecting the laboratory. Finally, you can recruit other ASCLS members; our collective voice is only as loud as the number making noise. Our profession is counting on each one of you.

National ASCLS
President – Maddie Josephs
President-Elect – Hassan Aziz
Secretary/Treasurer – Kyle Riding
Executive Vice-President – Jim Flanigan
Region III Board Director – Angela Darby

SCSCLS Board
President – Brandy Gunsolus
President-Elect – Krystin Dodge
Secretary – Shirley Adams
Treasurer – Janis Livingston
Area Director – Amber O'Shields
Area Director – April Orange
Area Director – Elissa Passiment
Webmaster – Jennifer Porter

Ask us how you can get involved to improve the profession for everyone!

Why Travel? cont.

decided I needed a change of scenery and weather. Being actively involved with ASCLS, I had attended the national meetings in Philadelphia, Chicago, and Charlotte for the 2016, 2018, and 2019 conferences respectively. Attending the conferences made me realize how fond I was of traveling in general. Once I found out there was a career path that allowed me to be a travel scientist, I was ecstatic!

A popular interview question is, "How do you adapt to change?" My answer: I embrace it. Becoming a travel technologist required me to adapt to constant change. Change allows for different perspectives. As a traveler, you learn quickly how a lab operates and then you're on your own after a short training period. You can bring new eyes and new ideas to the lab. Once your contract is up, you can either extend, or move on to another assignment. Travelers have to adapt to change quickly because every 13 weeks (the average contract length) our lives change and we're off to the next adventure! We fly by the seat of our pants!

In between assignments is the best time because depending on how much time there is between assignments you can usually take time off for yourself, go home to see family, or take a mini road trip across the US. On my way back from my first assignment I had a 40 hour drive back to Florida. I decided to take my time and stop in cities I've always wanted to visit (mainly Denver and Dallas). Travel scientists get to explore new cities, new states, and have new adventures with every assignment – and sometimes if you're lucky with scheduling, on your days off you can explore nearby cities!

The pandemic has truly shown how valuable travel scientists are to laboratories big and small across the nation. My life as a travel scientist has allowed me to see the United States, grow as a medical laboratory scientist and gain experience I wouldn't get, and also network with other laboratory professionals. I've become a more well-rounded medical laboratory scientist because I was a traveler.

- **Stephanie Walsh, MLS(ASCP)CM**

Patient Hx cont.

We know when our analyzers are "misbehaving." We know how to correlate laboratory values with patient diagnoses and when to question delta failures. But how often do we take a deep dive into the patient's history to help solve the puzzle? The laboratory remains closed off from other departments, and many of us are not comfortable engaging providers, even when we have information that may be helpful to the patient. A detailed review of a patient's history can sometimes be the key to arriving at the correct diagnosis.

I was recently involved with a patient who had a long-standing history of anemia, thought to be attributed to iron deficiency. During his recent visit, a typical nutritional anemia workup was ordered to help determine the root cause of the anemia. After review of all completed lab tests, however, it was obvious there was more to the story than just iron deficiency. The patient was anemic, as was expected, but his bilirubin level was elevated in the absence of other abnormal liver function tests, and his iron studies were normal. I found this peculiar, so I decided to investigate. Our records for this patient dated back to 2012.

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Join us for the 2021AL-GA-SC Virtual Medical Laboratory Symposium

April 9th & 10th

https://tinyurl.com/yxqpsuxn

Learn the latest in medical laboratory science, obtain P.A.C.E continuing education credits, attend the Friday night virtual social event, and play games to earn prizes!

Poster Competition with Undergraduate, Graduate, and Professional Categories!

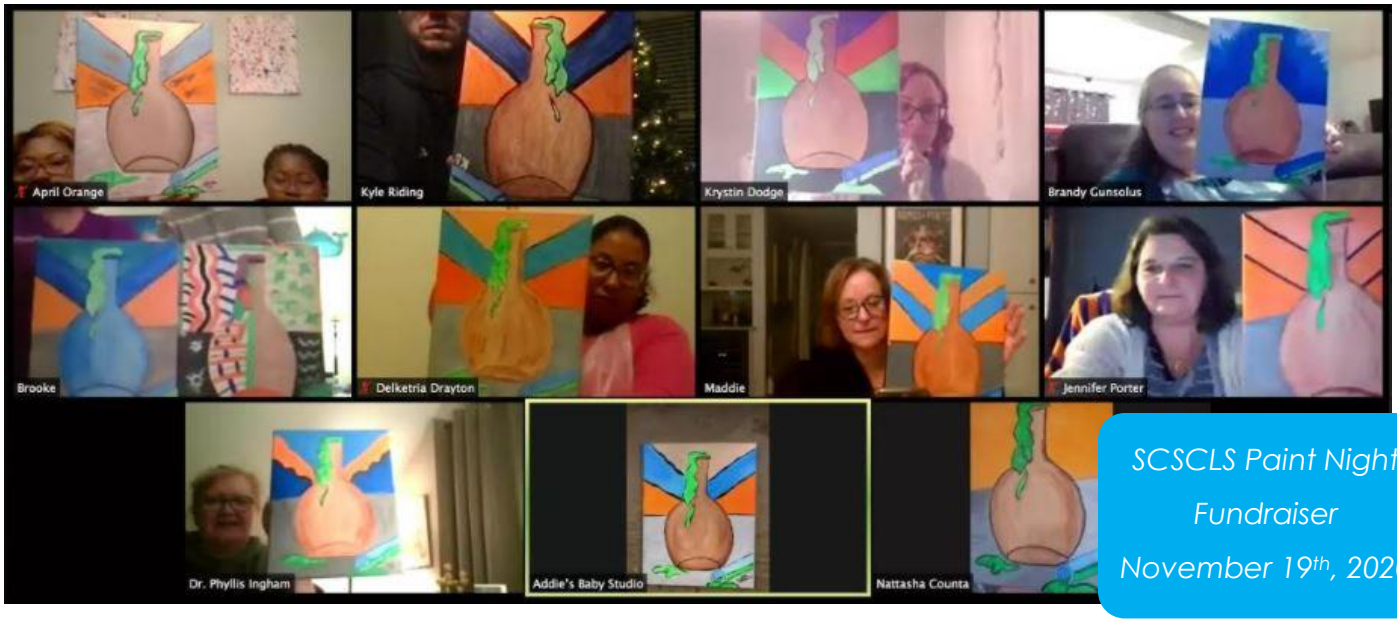
ASCLS Professional Members: $70.00

Non-ASCLS Professional Members: $85.00

ASCLS Student Members: $30.00

Non-ASCLS Student Members: $40.00

Students get who register and attend, will be able to view the professional track real-time and will receive links to view pre-recorded board review sessions after the conclusion of the symposium.



SCSCLS Paint Night Fundraiser

November 19th, 2020

Patient History cont.

From 2012 to the current visit, the patient continuously exhibited a mild anemia with intermittent elevations in bilirubin, ranging from 1.5–3.2 mg/dL (ref. 0.2-1.3 mg/dL). His other liver function tests had always been within normal limits. It appeared there was some chronic hemolysis present. After bringing this to the attention of the provider, a workup for hemolytic anemia was performed. Although it seemed unlikely that a genetic condition had not been uncovered in all the patient's 74 years, it wasn't out of the question. The hemolytic workup showed an elevated LDH and retic with an undetectable haptoglobin level. These results were consistent with in vivo hemolysis. A hemoglobin electrophoresis showed a pattern consistent with beta-thalassemia minor. A subsequent discussion with the patient revealed a strong family history of anemia.

Most patients with beta-thalassemia minor experience mild anemia, but iron levels are normal or elevated unless there is some other reason for iron deficiency, such as chronic blood loss. Iron therapy in these patients is neither warranted nor recommended. In fact, many patients with beta thalassemia may experience iron overload even in the absence of blood transfusions. Ineffective erythropoiesis coupled with decreased red blood cell survival result in increased erythropoiesis and increased secretion of erythroid factors that subsequently suppress hepcidin (Leecharoenkiat, et al., 2016). The result of this suppression is increased absorption of dietary iron, as well as increased release of iron from cellular stores. Excess free iron circulation can then cause organ and tissue damage leading to increased morbidity and mortality.

Arriving at the correct diagnosis sometimes requires multiple patient visits with performance of numerous tests. In some instances, patients may be treated with unnecessary and potentially harmful therapies before a correct diagnosis is reached. As part of the healthcare team, we should challenge ourselves to use our knowledge and skillset to decrease the time to diagnosis and/or prevent diagnostic error. A careful review of the patient's history is just one way to improve patient care.

Leecharoenkiat, K., Lithanatudom, P., Sornjai, W., & Smith, D. R. (2016). Iron dysregulation in beta-thalassemia. *Asian Pacific Journal of Tropical Medicine*, 9(11), 1035-1043. doi:10.1016/j.apjtm.2016.07.035

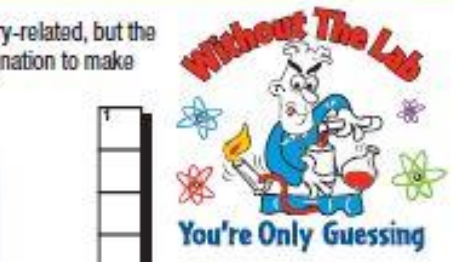
- **Krystin Dodge, MLS(ASCP)CM**

House of Delegates Update by Brandy Gunsolus, President - SCSCLS

In the past, the House of Delegates (HOD) would meet once per year at the annual meeting. For the first time, we had a mid-year HOD meeting on January 17th, 2021. There were discussions related to standardizing state fees which currently range from $5 to $25 depending upon the state (South Carolina is currently $10) as well as standardizing Regional finances. The ASCLS Finance Committee will hopefully have a full proposal on these issues for this summer's meeting. We also approved an updated position paper on the the Clinical Laboratory Workforce which had not been updated in nearly two decades. South Carolina is projected to have 4 Delegates for this summer's HOD. The Delegates include the President, the President-Elect, a Student Delegate, and an At-Large Delegate. Email brandy.gunsolus@gmail.com if interested in serving as a Student or At-Large Delegate.

Without The Lab You're Only Guessing CROSSWORD PUZZLE

The clues aren't all laboratory-related, but the answers are. Use your imagination to make the connections.



DOWN

1. The sharp end of the syringe
2. Wants to take your blood
4. Symbolized by this:
5. Provides a real close-up
6. Some couples have it, some don't
7. They're made of nitrile, vinyl, neoprene, or latex
8. Phlebotomists look for one of these
10. The liquid part of #11 Across
13. Has a dish named after him

ACROSS

3. A breed of dog that comes in black, chocolate, or yellow
6. It goes for a spin
9. The part of the blood cell that causes clotting
11. Type A, B, AB, or O
12. Right away!
14. The person who gets tested
15. Disease-causing microorganisms

Game Time!

1. Complete the puzzle
2. Fill out the below information
3. Take a screenshot
4. Email it to brandy.gunsolus@gmail.com

Complete all by March 1st to be entered into a drawing for a $25.00 Amazon gift card!

Name_____

City_____

Email_____

Phone(_____)_____

I am a:

□ Student
□ Laboratory Professional
□ Retiree

I want to volunteer to:

□ Write a Palmetto Probe newsletter article
□ Serve on a state committee
□ Serve on a national ASCLS committee
□ Help with AL-GA-SC Virtual Symposium Meeting
□ Lead a SCSCLS fundraiser
□ Plan a SCSCLS social event

Make sure you're signed up for our Connect Community to get the latest information. Also check your settings to ensure you are getting all info!