

# The Connection

April 2018

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## President's Message

### SPRING IS IN THE AIR



Spring is such a great time of the year. Typically (maybe not this year!) the snow is melting, blizzards are a distant memory, and green begins to fill our landscape with color again. Spring is also an exciting time for the laboratory. In North Dakota, we have the ASCLS-ND State Meeting to look forward to each year, and it never fails to provide a great networking and learning environment. We also have National Medical Laboratory Professional Week at the end of April, with all sorts of fun events planned at the local and/or national level (like the Lab Week 5K Run/Walk).

Spring is also a time to start fresh. How many of you do some special spring cleaning? It's like we are mirroring nature, and washing away the build-up from a long cold winter to reveal a clean, bright starting point. What a great metaphor for the lab, too! Maybe we all need to do some spring cleaning related to the lab. Take a look around your work place, and try to see it with a new perspective. What needs to be refreshed? What (or maybe who!) needs to be recharged? I am sure we can all find something that could use a little extra care or attention.

I hope everyone can enjoy this spring, both at home and at work! You can also be thinking ahead to some summer/fall events such as the ASCLS Annual Meeting in Chicago (not too far away!) or the ASCLS Region V Symposium in Minneapolis, MN (even closer!). It would be great to have some extra North Dakota representation at these events. Feel free to contact me if you want more information about them, or other ASCLS opportunities such as the Region V Leadership Academy. Happy spring!

Brooke Solberg

**Special points of interest:**

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# ASCLS - ND Membership Update

Zac Lunak, President-elect

We are almost to your goal of 100 members! We currently have 87 total members in the state of ND. We started the year with 62, so thanks to everyone that has recruited! Having increased membership is more important than ever as we try to have a united voice for very important regulatory and government issues.

Listed below are what I believe ASCLS offers its members. Keep in mind, ASCLS does not restrict its membership to medical laboratorians. Other lab professions, such as phlebotomists, lab assistants, etc. are also welcomed.

## Benefits of ASCLS

- Advocacy of profession (government affairs)
- Networking
- Publications
- Continuing Education
- Grassroots activities
- Online Community Resources
- Much more!

## New Professional Delegate Update: Samantha Peterson

The purpose of the “New Professional Delegate” position is to give individuals new to the profession an opportunity to become familiar with the ASCLS organization at a national level, as well as the issues it is concerned with. The position also allows an individual to be directly involved with the organization by serving as a voting member for the House of Delegates. While serving in this position, I have been lucky enough to do even more than that. Listed below are a few of the great things I’ve gotten the opportunity to be involved while serving as the New Professional Delegate.

### **ASCLS National Meeting – San Diego, CA**

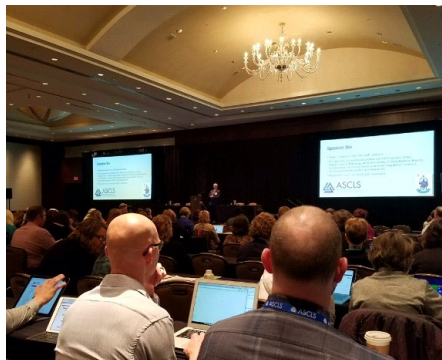
The most significant event that the New Professional Delegate is involved with is the ASCLS National Meeting, where they serve as a voting member for the House of Delegates. The 2017 National Meeting was held in beautiful San Diego, CA. At the meeting, I was able to attend a ton of great sessions and meetings, a few of which included the Board of Director’s meeting, Promotion of the Profession Committee meeting, Professional Issues Update, New Professional Members and New Members Forum, the Government Affairs Update, the House of Delegates meeting and the famed Clinical Lab Expo. The National Meeting is a fantastic place to meet motivated and passionate laboratory professionals who really want to make a difference. It also clarifies what exactly the society does at a national level and how the organization runs.



Brooke Solberg— Pres Elect, Tammy Windish - Delegate, Zac Lunak - Pres elect-elect, Ali Hassan - Student Rep, Sharon Reistad - President, Samantha Peterson - New Professional

## **Clinical Laboratory Educators Conference - Houston, TX**

In February, I was fortunate enough to attend another ASCLS sponsored event: The Clinical Laboratory Educator's Conference (CLEC) in Houston, TX. At this meeting I was able to network with other laboratory educator's, learn about issues in MLS education as well as techniques for teaching new laboratory professionals. The keynote speaker was Dr. Michael Laposata of UTMB (pictured below) who spoke about diagnostic management teams and what the laboratory professional's role in them would look like, particularly the DCLS. It was another great ASCLS event that I look forward to attending in the future!



## **ASCLS-ND Membership Recruitment Efforts**

Upon serving more directly in ASCLS and being made aware of the inner workings of the society, I have become familiar with an issue that many of you already know about: low membership numbers. In North Dakota, only 5% of licensed MLS's are members of ASCLS-ND. That is not okay! In an effort to try and remedy this, President-elect, Zac Lunak and I created a "Why Join ASCLS-ND" flyer and drafted an e-mail which we sent out to our UND MLS 2016 and 2017 graduates who are working in North Dakota but are not ASCLS members. The flyer and e-mail highlight the benefits of joining ASCLS and why it is so important to do so. If you want to print and distribute the flyer, you can find a full-sized version of it on page 10. Feel free to hang-it up or pass it out!

## **Laboratory Week Run**

At the national meeting, I learned about the “Laboratory Week Run”, a virtual 5k that allows you to participate from anywhere. I also had the pleasure of meeting its creator, Aly Storla. Aly is such a sweet and hard working woman who cares a lot about this profession and this organization. I will be partaking in the Lab Week Run at the end of April with a group of my fellow laboratory professionals at UND. All proceeds of the run support the ASCLS new professionals and students.

The opportunity to be more involved in ASCLS and have a direct say in decisions that are made has shown me the difference organizations can make for a profession and just how important it is to take part in those organizations. One thing I love about this society is that there are so many opportunities for individuals to take on leadership roles, get involved and make their own difference in the laboratory profession. Serving as the New Professional Delegate is a great way to “dip your toes in the water” of the ASCLS organization and really get a feel for the impact the organization makes. I am fully enjoying the chance to be more involved in this organization, and in the profession, and plan to stay involved in the future.

For more information on how you can get involved visit the ASCLS-ND website (or click on website link) at [asclsnd.org](http://asclsnd.org) or the national website at [ascls.org](http://ascls.org)

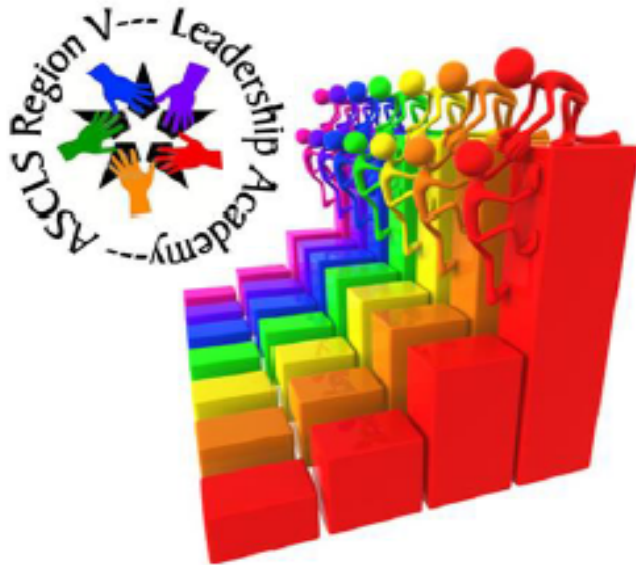


### **Legislative Symposium Update Zac Lunak, ASCLS-ND President-elect**

The 2018 ASCLS Legislative Symposium was held March 19 and 20<sup>th</sup>. The ASCLS-ND student representative, Ali Hassan, and I had the pleasure attending and representing our state. The first day was largely spent learning the specific details about issues in our profession: Protecting Access to Medicare Act (PAMA), workforce shortage, and the CMS Personnel Regulations. In addition, we were briefed on the current culture within Washington DC, mainly by our lobbyist Patrick Cooney. To my surprise, there actually seems to be a lot of optimism! We finished the day up by preparing and practicing our delivery for the congressional visits. The next morning, Ali and I set out to Capitol Hill to visit with legislative assistants from Representative Cramer, and Senators Hoeven and Heitkamp. During our meetings, we focused on 2 major issues: PAMA and the workforce shortage. Briefly, PAMA proposes cuts to the laboratory fee schedule that is based on a ‘market price’. Unfortunately the market price is based mainly on larger reference laboratories that have high volumes of testing. As you can imagine, the prices from these laboratories are far lower compared to rural laboratories and nursing homes. Therefore, ASCLS fears that most labs will not be able to survive with the new proposed price. We stressed that the laboratory fee schedule be re-assessed and data from all laboratories must be taken into account. Ali had great stories that stressed the importance of rural laboratories on a person’s healthcare based on his personal experiences working in his lab.

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## ASCLS Members! Are you....

Looking for an opportunity of a lifetime?

Want to enhance your leadership skills?

Interested in taking that next step up in your professional career?

Want to expand your network of professional friends?

Looking for ways to enhance your professional life and path to professional success?

### The ASCLS Region V Leadership Academy

**might** be just the opportunity you've been looking for!

Visit the Leadership Academy website to learn more about this amazing opportunity.

The website contains information on the academy curriculum, time involvement, accountabilities, individuals to contact if you have questions, and complete information on the application/selection process.

We are accepting applications now!

We'd love to have you in our next class!

**Application DEADLINE: June 1, 2018**

[www.regionvascls.online/leadership-academy.html](http://www.regionvascls.online/leadership-academy.html)



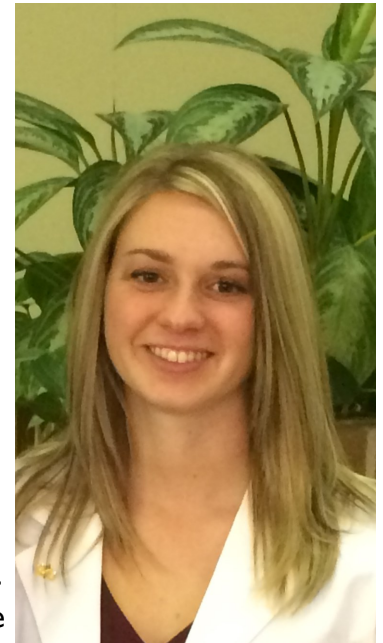
## Laboratorians Do Make a Difference

As I sat reading the January edition of *The Connection*, I was saddened to read Brooke's comment about laboratorians not feeling like they make an impact on patient care. And I wanted to tell you, that's just not true.

I recently changed roles, going from a medical laboratory scientist to a physician assistant. As a PA I work for a central rural health clinic with satellite clinics dispersed in the communities surrounding. Our central location has everything a PA could need – lab, x-ray, pharmacy, DME, you name it. Days I work in that clinic are great. But I also spend a third of my time in the satellite clinics and that's a different story.

In the satellite clinics I have only a few lab tests available in my arsenal. Typically a blood sugar, urine dipstick, sed rate, and a handful of kit tests. My nurses have been trained by lab to do the work. They do an alright job, but they just don't have the same background and training as lab professionals. They know they need to do QC, but they don't quite know what the point is or why it needs to be done once a month versus weekly. They can run an influenza test, but I usually give them a heads up before I collect it so they can brush up on how to do the procedure. We make it through, but you can see it's just not the same as having skilled lab staff.

The type of patient I can see is also affected. While the mission of our satellite clinics is to provide care to areas that are lacking, there are just some patients I cannot offer care to because of the services I lack. Lab is one of those services. For example, a patient walked in and said, "I am on chemo and I have a fever." This is a patient I desperately wanted to provide care to, but all I could offer was an influenza and urine dip. I couldn't do a white count, couldn't



Nicole Lemieux  
ASCLS past president

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We also stressed that laboratories are already struggling with tight budgets and a workforce shortage. We encouraged the representatives to support any bill that would address our shortage such as specific funding for clinical sites, educational programs, etc. In addition, we encouraged the legislators to support the enhancement of recruitment and retention efforts within the Veteran Affairs (VA). ASCLS believes this would not only address their current need for laboratory professionals but also give the VA capability to host more students for clinical rotations. Overall, the symposium was an excellent experience and successful. We had great responses from the legislative assistants. All of them indicated they were going to look into the PAMA legislation and make sure their congress men and women were aware of the issue. I did write them a quick follow-up so hopefully they won't forget about us!



## Professional Opportunity Waiting For You!

### Leadership Academy Sponsors

- ASCLS – Minnesota
- ASCLS- North Dakota
- ASCLS – South Dakota
- ASCLS - Wisconsin

## Leadership Academy Information & Contacts

- ★ For complete program and application information visit our ASCLS Region V Leadership Academy webpage at

[www.regionvascls.org/leadership-academy.html](http://www.regionvascls.org/leadership-academy.html)

- ★ Who to contact for additional Leadership Academy information:
  - ✓ Any Leadership Academy Committee Member. Contact information on the Academy webpage
  - ✓ Any ASCLS-MN, ASCLS-ND, ASCLS-WI or ASCLS-SD Board of Directors members. Contact information can be found on the state society's webpage at:

[www.asclmn.org](http://www.asclmn.org)  
[www.asclnd.org](http://www.asclnd.org)  
[www.ascls-sd.org](http://www.ascls-sd.org)  
[www.ascls-wi.org](http://www.ascls-wi.org)





## Region V Testimonials

"I knew going into Leadership Academy I was going to learn a lot, but the best skill was how to work with others. Working on a project through emails and conference calls, it's a skill you have to master! Leadership Academy also introduced me to new friends throughout our region. I've made lifelong bonds with my fellow classmates."

—Nicole Hager, North Dakota  
Leadership Academy Graduate 2013-14

"I applied to the Region V Leadership Academy to expand my knowledge of the American Society of Clinical Laboratory Science as a whole. The Region V Leadership Academy team quickly helped me realize that I can make a difference within our professional organization. The result of attending and graduating from the academy has been rewarding in such that I am applying to take on a new and exciting Leadership role for ASCLS-SD. Another benefit of attending the Academy is that the networking possibilities are endless! I would recommend anyone who is interested in any type of Leadership role within the Laboratory or within our professional organization attend the Region V Leadership Academy."

—Jannifer Kajotic, South Dakota  
Leadership Academy Graduate 2014-15

"Participating in the ASCLS Region V Leadership Academy has given me the confidence to pursue new opportunities both within my workplace and within ASCLS. Graduates will leave this program having fine-tuned many skills necessary for success. But the most valuable lesson I took out of the experience was this: I, like anyone else, brings a unique perspective and skill-set to every challenge, and that I should never be afraid to use it. It is very heartening to work with people who take a genuine interest in your growth and development as a future lab leader. I recommend all interested candidates to take on this opportunity."

—Kathy Weber, Minnesota  
Leadership Academy Graduate 2015-2016

## ASCLS Region V Leadership Academy...

### MISSION

The ASCLS Region V Leadership Academy will provide guidance, education and resources at a regional level to prepare ASCLS members for leadership roles in ASCLS, within the profession and the workplace.

### GOALS

- Provide a structured regional Leadership Academy that will prepare our members to become future leaders in ASCLS and within the profession of Medical Laboratory Science.
- Identify members with potential to become leaders in ASCLS and invest in their growth and development.
- Provide the Leadership Academy participants with resources, skills and knowledge to prepare them and allow them to succeed in leadership roles.



# WHY JOIN ASCLS-ND?

## Because it's worth it!

Being a member of ASCLS-ND allows you to be a stake-holder in your profession, take on a leadership roles and make an important impact on the field of medical laboratory science.



- Network with influencers in the field
- Advocate for the profession through legislative action
- Travel to regional & national conferences
- Stay relevant on current issues
- Continuing education opportunities

## JOIN TODAY!

Visit [www.ascls.org](http://www.ascls.org), click on "Membership", then click on "Join" OR follow the link below:

<http://www.ascls.org/membership/join>

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## BENEFITS

### Leadership Academy Participant Benefits

1. Gain confidence to step into leadership roles
2. Enhance personal and professional knowledge and skills to be successful
3. Have opportunities to be mentored by and learn from ASCLS leaders
4. Broaden professional network of friends and peers within ASCLS
5. Acquire experience to identify and successfully achieve goals

### Regional Program Benefits

1. Minimal time away from home and cost for the participant
2. Host state societies assist with their state members' participant expenses
3. One-year program – October thru October
4. Develop a network of professionals close to home

## PROGRAM HIGHLIGHTS

- Face-to-face meetings
- Group projects
- Conference call sessions
- PACE credits awarded

## CURRICULUM SUMMARY

The curriculum will be studied over the course of a year, beginning with a Region V Symposium and ending with graduation at the following Region V Symposium.

Conference calls and a retreat will be held during the year.

### Topics of study and activity will include:

- History of ASCLS
- Leadership and communication styles
- Goals and strategic planning
- Organization skills and time management
- Conflict management
- Conducting successful meetings
- Professional advocacy
- Recruitment strategies
- Leadership book discussions
- Group teambuilding projects
- Participation in meetings

For complete curriculum information, visit the Leadership Academy webpage:

[www.regionvscb.org/leadership-academy.html](http://www.regionvscb.org/leadership-academy.html)



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check a differential, couldn't see her electrolytes, her kidney function. I had to send her away. Without an onsite lab, I couldn't care for her.

Lab is vital to patient care. Believe or not, providers do realize this. Especially when we find ourselves without that option.

[I will say one thing – I do enjoy my time in the satellite clinics as my nurses usually let me draw blood on my patients. I kind of miss that (though I don't miss when it was my weekend to do morning draws!)]

Nicole Lemieux, PA-C, MLS



## ASCLS ND State Meeting Highlights

The 2018 state meeting was held in Fargo, ND. We would like to give a huge thank you to the following people for putting on such a wonderful meeting: Alice Hawley - Chair, Allison Borsheim, James Breen, Shelly Evenson, Jana Fischer, Susan Hollister, Timothy McManamon, Jennifer Rider, DeLilah Rosencrans, Jody Thompson and Jane Voss. You did a great job, THANK YOU

The theme this year was: UP Step UP, Speak UP, Stand UP– You have Unlimited Potential!



The Meeting offered some great CEU's covering a rainbow of topics. A few included: Influenza: History and Impact in the State of ND, Letting Go of the Rules of 3...and How Not to Let the MCHC Rule Your Life, Team Building, What's up with CLIA and many, many more.

A big THANK YOU to our vendors also

ASCLS was able to offer Scholarships to very deserving student members:

Courtney Dubbels and Leah Runyan

We also chose our new Student Rep for the 2018-2019 year. Congratulations

Leah Runyan

During the business meeting we got to meet the new board members that were voted in by our membership, so the 2018-2019 ASCLS ND Board will be:

Zac Lunak - President

Linda Ray - President Elect

Secretary/Treasurer - Heather Gilbert

New Professional - Ali Hassan

Student Representative - Leah Runyan

Board Member at Large (2nd year) - Lacey Schultz

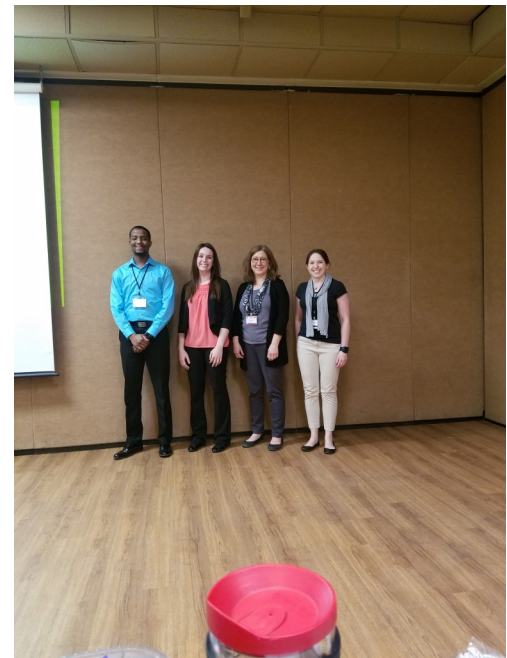
Board Member at Large (1st year) - Larissa Unruh



L-R  
Courtney Dubbels  
Ali Hassan  
(current student rep)  
Leah Runyan



Zac Lunak will take over (along with rest of elected board) the first part of August following the ASCLS National Meeting



Newly Elected Board Members (present at meeting) L-R

Ali Hassan - New Professional

Leah Runyan - Student Rep

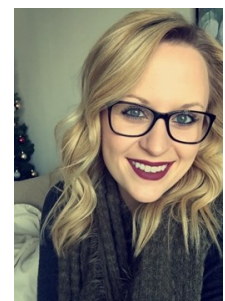
Linda Ray - President Elect

Heather Gilbert - Sec/Treas



Lacey Schultz  
2nd year Member at Large

Samantha Peterson  
Nominations Chair



## 2018 ASCLS-ND AWARDS

### Keys To The Future

This award serves to recognize and reward ASCLS members who have demonstrated their leadership potential to the organization, and to provide these members with structured mentoring.

The Key to the Future program is administered by the ASCLS leadership development committee and is intended to assist constituent societies in the development of potential leaders to serve at local, state, regional and national levels of the Society. Additionally, the program encourages appointments and nominations of these highly motivated members to positions of responsibility within the organization that will further their leadership development.

This award is only given to a person once.

This years winners:

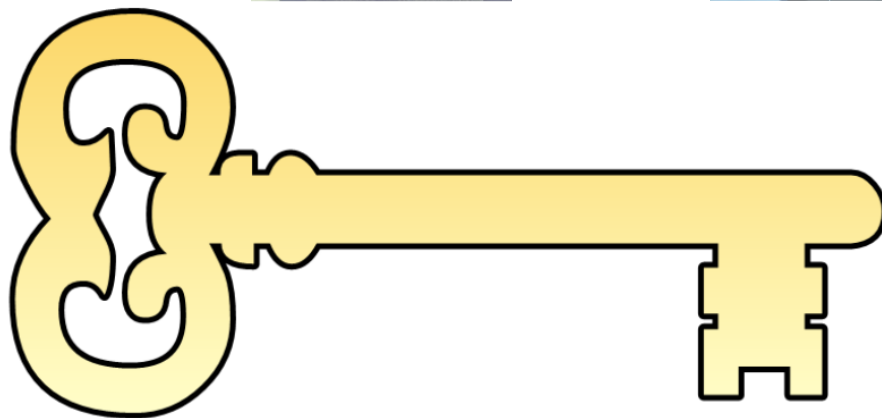
Ali Hassan,



Samantha Peterson



Kristie Schwarzkopf





### Omicron Sigma

First awarded in 1977, Omicron Sigma is the ASCLS President’s Honor Roll for Outstanding Service. It provides lasting recognition of those dedicated members who volunteer their personal resources, time and energy to the ASCLS. Recognition is at three levels: national, regional, and constituent society. This allows constituent society presidents, regional directors, and the ASCLS President to recognize members for outstanding service

This years winners are:

NATIONAL

REGIONAL

CONSTITUENT

ALICE HAWLEY

TAMMY WINDISH  
BROOKE SOLBERG  
CHRISTIE MASSEN

ELAINE RAMSTAD  
JOZEY KEITH  
MARY COLEMAN  
ZACHARY LUNAK  
ALI HASSAN  
SHANNON JONGEWARD  
MUHAMMAD RIJI\*  
STACY ASKVIK\*



\* NOT PICTURED

MEMBER OF THE YEAR

SHARON REISTAD



YEARS OF SERVICE AWARDS

40 YEARS - Mary Dhuyvette

35 YEARS - Liane Anderson

25 YEARS - Terri Hintz

20 YEARS - Sue Huntz

10 YEARS - Catherine Janikowski  
Tammy Renner

5 YEARS - Jozey Keith

Congratulations and thank you for  
your dedication to ASCLS

TO NOMINATE SOMEONE OR YOURSELF FOR THE 2018-2019 BOARD  
CONTACT SAMANTHA PETERSON AT:

[SPETERSON@UND.EDU](mailto:SPETERSON@UND.EDU)

OR FOR MEMBER OF THE YEAR NOMINATION GO TO:

[ASCLSND.ORG](http://ASCLSND.ORG)

Then click on membership and member information



## PAC – the “Inside Scoop”

From Various ASCLS PAC Sources and Edited by Mary Coleman, ASCLS-ND PAC Representative

**PAC** – if someone asked you what PAC is, what would you say? Is it important? Do we need to get involved? Don't stop reading yet.....

*Facts every ASCLS member needs to know.....*

- ASCLS is committed to supporting the laboratory profession – many decisions that affect us are made on Capitol Hill. **Lobbying is essential** to assure input on critical health care decisions.
- ASCLS PAC supports these efforts – solely through member contributions. ASCLS PAC supports the legislative symposium, gives contributions to members of congress who understand the importance of our profession and are strong proponents of our profession, and gives our legislative consultants/ lobbyists a seat at the table ( both literally and figuratively).

*What is a PAC and why should I donate?*

Political Action Committees were created in 1944 for the purpose of re-electing President Franklin D Roosevelt. Since that time, PACs have been organized for the purpose of raising and spending money to elect and defeat candidates who can influence decision-making for specific businesses or special-interest groups.

In order to effect any changes for the laboratory profession on the "Hill", ASCLS utilizes a legislative lobbyist, Patrick Cooney, to identify key Congressmen/women who are on committees that can directly influence health care decisions relating to the laboratory. Once these individuals are identified, Patrick tries to secure an audience with them; this may require an ASCLS contribution.

Without available funding, these opportunities slip away – unfortunately, the laboratory profession has not had a big voice over the years due to our desire to remain “behind the scenes.” **We need someone to speak for us, and that takes money.**

- The 2017 goal was to raise \$50,000. With 50 states, that means all states should try to raise at least \$1000 to reach our goal. Sounds pretty doable – but believe it or not, some states don't raise even \$100.
- Gold Level donors are recognized at the national meeting (and can be recognized by the states/ regions also) – these are people who give \$300 to ASCLS PAC over the course of the ASCLS fiscal

year. There are a number of these folks. But they can't carry the load for the whole organization. Positive changes will only be made if we all contribute toward keeping our laboratory voices loud enough to be heard and this takes money.

*How can I donate to ASCLS-ND PAC?*

You can donate at ASCLS-ND by donating online at the [ascls.org](http://ascls.org) site, logging in, and clicking on donate on the right hand side of the website page. [Click here](#) It should bring you to the online donation where you can pay by credit card at this site. Or you can obtain a donation form online by [clicking here](#), and I have included one in this Newsletter.\* or donate at the ASCLS PAC booth if attending the national meeting in Chicago, 2018, or the Regional meeting in Minneapolis, Oct. 4-5, 2018. \* If using the form included in the Newsletter, it is better to send cash or check, than writing down your credit card number. Credit card numbers have been stolen via writing it down on the form.

*What are some current legislative topics?*

Talking points at the March 19-20, 2018 legislative days were: Protecting Access to Medicare Act (PAMA) - it will reset the clinical lab fee schedule for Medicare; Growing Crisis in the Clinical Lab Workforce; and other issues discussed by Zac Lunak and Ali Hassan, who attended legislative days on March 19-20, 2018. Check out information on [our website](#).

To read more about PAC [click here](#)



## Diagnostic Management Teams: What is It All About?

By Mary Coleman

Linda Ray and I had the opportunity to attend a meeting in Galveston, Texas February 2018, on Diagnostic Management Teams (DMTs). The meeting was put on by the University of Texas Medical Branch (UTMB) Department of Pathology, Galveston. Dr. Mike Laposata, chair of the UTMB Department of Pathology, led the way in discussing the idea of DMTs. This meeting was the second annual meeting for the event. I believe they plan to have another meeting February, 2019. Dr. Laposata also spoke at the ASCLS-ND meeting in Grand Forks in 2014 about the clinical doctorate and DMTs. Dr. Laposata spoke at the CLEC meeting in February 2018 in Houston, Texas. His presentation at the Houston meeting is available on [YOUTUBE](#). Dr. Laposata stated that the UTMB has at least 4 DMTs at UTMB: hemostasis/ coagulation (his specialty), a transfusion DMT, a liver function DMT, and a child abuse- forensic work DMT. What does a DMT do? It is a group of healthcare professionals that get together and work on selected patients to come up with an interpretation of the patient's test results in a particular area, such as coagulation tests, and/or diagnosis for the patient. The UTMB has a clinical doctorate program and utilizes clinical doctorate students along with other healthcare professionals in their DMTs. I believe UTMB currently has about 20 or more students in the program. You can check out their [curriculum here](#). Nadine Fydryszewski, Rutgers University, also has a clinical doctorate program. You can check out the Rutgers's [curriculum here](#). Linda Ray and I had a chance to talk to Nadine about her program and meet one of her students, who was a lab manager for many years. Nadine's program is a bit different than Dr. Laposata's, and focuses more on a clinical year and making clinical rounds. Nadine also hopes that the Board of Certification will develop a clinical doctorate certification exam. My impression of Nadine's program was that it really gives lab managers, who may have been doing a clinical doctorate job for years, that is, networking with physicians, answering laboratory questions about what to order, what a lab test means, etc, the credentials that go along with the job.



As I said previously, Dr. Laposata's program works more with a group of specialists getting together to look at the patient's history, lab and other diagnostic test results ( eg. radiology) and completing a report of their interpretation that is added to the patient's chart. The DMTs can consist of pathologists, physicians, pathology residents, clinical doctorates, and other interested laboratorians. Dr. Laposata also discussed the possibility of Radiology and Pathology combining their departments, as Diagnostic Medicine.

At the February meeting, Dr. Laposata also had his information technology team discuss options on how to have DMT meetings via teleconferences. Also medical librarians discussed how they help search for evidence based articles for the DMT meetings.

Dr. Laposata encouraged all of us in MLS to say something if we see and know something. If we are an expert in an area: share our information. He said the 3 A's to remember are: be accurate, be available, and be affable. It also helps if you have a referenced article to share with a physician when providing them with answers to their questions.



How can we in North Dakota do some of the things that Dr. Laposata is suggesting? I suspect some lab managers and lab supervisors have been doing the clinical doctorate job for years. It would be great if they would share their stories and case studies. Dr. Laposata is always looking for examples.

Even though we may not start DMTs in our healthcare facilities, from my experience over the years, some things we could do:

I think algorithms for various conditions is the way to go. The physician can also help us by providing pertinent clinical history from the patient. Ask the physician assistance by supporting algorithms that we develop, and/or pass by a medical review committee. Examples below:

1. Starting a DMT is time consuming. For a rural hospital it might not be practical. As my students send me journal articles they have read, the last two were on patients who had died from *Naegleria fowleri*. The lab did not find the organism, even though it was there. As I read the articles the idea came to me to have a *Naegleria* algorithm in the lab, that is, if the physician is looking for bacterial meningitis, and no bacteria are found, do an additional search for *Naegleria* which involves either a wet prep or a Wright-Giemsa stain. *Naegleria*, to my knowledge, has not been found in North Dakota, but you do not know if the patient had just been in Stillwater, MN (2 children died there from *Naegleria*), Florida, Texas, or Lake Havasu, Arizona.

2. When a blood smear shows anemia and hypochromic microcytic cells on a new pediatric patient, could there be a reflex testing for serum ferritin, or in the future, serum transferrin receptor/log ferritin, to verify that it is an iron deficient patient and not a thalassemia or red cell aplasia. Again it is much more likely that it is an iron deficiency, and even though quite rare, I know students and patients that have been treated with iron, and they did not have an iron deficiency. Also I think it would be helpful if donor centers would not say they are checking for iron, when they are really testing the hemoglobin for their potential donors. Most of my students taking hematology for the first time are surprised to learn that iron deficiency is not the only type of anemia.

We in the lab can make some changes to help the physician too: examples below:

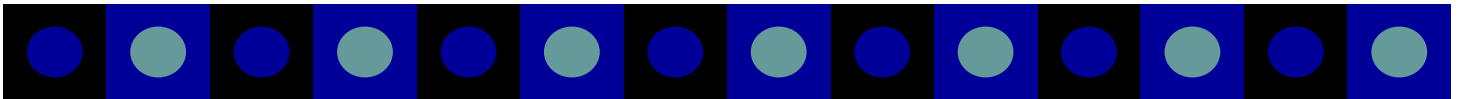
1. Stop reporting % for individual white cells and report absolute values. We could then do away with relative lymphocytosis etc. Also my preference to stop reporting activated lymphocytes as a % of total lymphs. Just report the absolute #s. Here is a comment I posted on the Discussion Board on one of my courses: "One lab reported % counts and the supervisor said it was up to the physician to calculate the absolute numbers. On a case study submitted the lab results were WBC  $21 \times 10^9/L$ , PMS 23.8% ( and flagged as Low) and Lymphs 68.6% and flagged as high. What is wrong with reporting this way?" It is misleading to the physician. At the DMT meeting in Galveston, one clinical Pathologist from Cleveland, Ohio said she would like to do away with reporting % in differentials to physicians, just report absolutes. Also Dr. Laposata said that Radiologists almost always send an interpretation with the radiology reports. He said it would be ridiculous to ask general physicians to interpret radiology results, so why do we expect the physicians to do it for lab results. And in response to the lab director who said: "let the physician calculate the absolute values of white cells" I would say: "the physicians are too busy to have to calculate absolute values for white cells. That is something most of our hematology instruments can do."



2. Provide newsletters to physicians and healthcare staff of updates in the lab, new interferences discovered etc. This could be part of the clinical doctorate's job description.

If others have examples please send to me at [mary.coleman@med.und.edu](mailto:mary.coleman@med.und.edu)

More information about the clinical doctorates can be [found here](#):



## **REGION V SYMPOSIUM**

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