



Tulare-Kings Chapter CAMLT

Annual Seminar Series

Saturday, March 3 and Sunday March 4, 2018

Visalia Convention Center 303 E. Acequia, Visalia, CA

Saturday 8:15—11:45 a.m. 3.0 CE hrs. Level: Basic/Intermediate

Sara Warnke, Clinical TEG Specialist, and Mike Miller, M.D., Manager Clinical Hemostasis Resources Sponsor: Haemonetics, and David S. Hewitt, M.D. Kaweah Delta Medical Center

“Managing Patient Risk of Hemorrhage and Thrombosis: TEG6s-Novel Technology for Hemostasis Analysis” ; “The Future of Viscoelastic Testing”, Followed by TEG Case Studies.

Saturday 1:00—4:30 p.m. 3.0 CE hrs. Level: Basic/Intermediate

Maria Crisostomo, Senior Product Manager and Alfredo Villareal, Product Manager Sponsor: BIORAD Laboratories, Inc. “Which of the Two Make the Best Soul Mate: An Infectious or Autoimmune Antibody” and “HIV Testing: Historical Review and Preparing for the Future.” plus “HIV testing -Historical Review and Preparing for the Future.”

Sunday 8:15—11:45 a.m. 3.0 CE hrs. Level: Basic/Intermediate

Justin R. Rhees, MS, MLS(ASCP)CM, SBBCM, Assistant Professor/Program Director. Sponsor: ARUP, Inc. “Transfusion Reactions: Case Studies; Reporting Critical Values; and Improving Efficacy with SBAR Technology.”

Sunday 1:00- 4:30 p.m. 3.0 CE hrs. Level: Basic/Intermediate

Marcus Margand, Account Manager, Hemostasis and Steven P. Schmiedel, CLS, ASCP Sponsor: IL Laboratory Inc. “Pre-analytical Challenges in Hemostasis Testing.” “Hemostasis 101 - A Beginning Journey” ; and “Heparin Induced Thrombocytopenia.”

NOTE: Objectives, Abstracts and Course Outlines are attached

Tulare-Kings Registration Form

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____ Phone: _____ Email: _____

CAMLT member? Yes No Senior? Yes (deduct \$2.50 per 3 CE’s) No License #: _____

Circle Workshop Choices: Sat AM: Coagulation Sat PM: Hematology Sun AM: Microbiology Sun PM: Infectious Disease: Zika

FEE	0.5 day	1 day	1.5 day	2 days
Member	\$35.00	\$60.00	\$ 90.00	\$110.00
Non Member	\$45.00	\$80.00	\$110.00	\$150.00
Student	\$ 5.00	\$10.00	\$ 15.00	\$ 20.00

FEE ENCLOSED: _____ DATE: _____ I would like confirmation by EMAIL TEXT MAIL Deadline: Registration must be received by Thurs, March 1st. Refund Policy: Notice of cancellation must be received by Friday, March 2nd or there may be a \$10.00 processing fee charged after this date.

Make check payable and mail to: Tulare-Kings CAMLT c/o 2845 S. Conyer St. Visalia, CA 93277



Tulare-Kings Chapter CAMLT Annual Seminar Series
Saturday, March 3 and Sunday March 4, 2018
Workshop Objectives & Summary

Saturday, March 3rd 8:15—11:45 am Sara Warnke, Clinical TEG Specialist; Mike Miller, M.D. Manager Clinical Hemostasis Resources, Haemonetics and David S. Hewitt, M.D. Kaweah Delta Medical Center.

“Use of Thromboelastography(TEG) in Monitoring of Hemostasis”:TEG6s Novel Technology for Hemostasis Analysis.”

Course Outline: An overview of TEG fundamentals-description and differentiate TEG from conventional coags; TEG tests available for use; application and interpretation of TEG results; review of TEG in literature; examples of TEG protocols; limitations of TEG and introduction of next generation of TEG.

Objectives: 1) Differentiate TEG from conventional coags. 2) List available TEG tests 3) Define basic TEG parameters 4) Interpret basic TEG results; and r5) Recognize clinical impact of TEG.

“The Future of Viscoelastic Testing”

Course Outline: This course will look at a new method for viscoelastic testing. While the method will be explained the ability to read resultant tracing will be the same, with variables that are the same. A new cartridge based system will allow clinicians to get faster results and a more comprehensive assay. QC and maintenance will be discussed as will administrative management of results.

Objectives: 1) Describe viscoelastic testing via resonance frequency 2) Describe variables from the cartridge based assays and identify what each variable represents. 3) Identify IQCP QC requirements for TEG testing 4) Analyze use and placement of devices throughout the facility 5) Identify and describe users/clinical interfaces for administrative purposes 6) Identify requirements for device/remote viewing and 7) Develop a protocol for clinical use.

Saturday March 3rd 1:00—4:30 p.m. Maria Crisostomo, Product Manager BIORAD Laboratories Inc.

“Which of the Two Make the Best Soul Mates: An Infectious or Autoimmune Antibody.”

Course Outline: This session will take participants through a memory lane walk-through of diagnostic testing in the areas of HIV, syphilis and autoimmunity. Participants will be able to regain an understanding of the evolution of testing in 3 areas: their respective testing algorithms and how the “perfect” pairing of antigen and antibody contributes to laboratory’s decision as to which tests are appropriate for their patient population and laboratory workflow.

Objectives: 1) Describe the evolution of diagnostic tests utilized in the areas of HIV, Syphilis and Autoimmune testing. 2) Evaluate alternative testing algorithms in these 3 areas of diagnostic testing based on the clinical utility of the respective diagnostic tests. 3) Analyze the immunological reactivity between antigen and antibody and how their “ideal” pairing contribute to the performance of an assay (sensitivity, specificity, Positive Predictive Value and Negative Predictive Value.)

Saturday , March 3rd 1:00—4:30 p.m. Senior Product Manager; Alfred Villareal, BIORAD Laboratories

“HIV Testing - Historical Review and Preparing for the Future”

Course Outline: The focus on HIV testing as it relates to the current recommended algorithm. Past and current diagnostic screening tests and confirmatory (supplemental) tests will be identified to demonstrate how HIV tests have evolved into powerful tools to identify early HIV infection. A description of the old and new testing algorithms will be described with the reasons behind the CDC’s June 2014 recommendation.

Objectives: 1) Explain how HIV diagnostic tests have increased in sensitivity 2) Describe the importance of current HIV testing algorithm in regard to public health and 3) Explain the reasons behind reporting results that are given to the one ordering the tests.

Sunday, March 4th 8:15—11:45 a.m. Justin R. Rhees, MS, MLS (ASCP)CM, SBBCM, Assistant Professor, Program Director, ARUP Inc.

“Transfusion Reactions: Case Studies; Reporting Critical Values”

Course Outline: Many of the signs and symptoms of transfusion reactions are shared, and not all reactions are diagnosed by tests performed in the laboratory. This session includes a review of the characteristics of acute and delayed hemolytic and nonhemolytic transfusion reactions, and several case studies will be presented.

Objectives: 1) Discuss the risks and adverse events associated with the transfusion of various blood products. 2) Compare and contrast the signs and symptoms associated with acute and delayed hemolytic and nonhemolytic transfusion reactions. 3) Given several case histories, correctly identify the most likely transfusion reaction and discuss the further testing and treatment indicated for each patient.

“Reporting Critical Values: Improving Efficacy with SBAR Technology”

Course Outline: Medical Errors lead to significant morbidity and mortality among hospitalized patients. Preventable adverse events caused by medical errors can be reduced through effective, standardized communication techniques such as SBAR and closed-loop communication.

Objectives: 1) Define and discuss the SBAR and closed-loop communication techniques. 2) Identify specific areas for improvement to communication between the clinical and laboratory staff. 3) Given several simulated critical value reporting scenarios, apply SBAR and closed-loop communication techniques to improve interprofessional communication and reduce the risk of medical error as a result of miscommunication.

Saturday, March 4th 1:00– 4:30 pm Marcus Margand, Account Manager, Hemostasis , IL Laboratories Inc.

“Pre-analytical Challenges in Hemostasis Testing”

Course Outline: It has been reported that the majority of erroneous results reported by the clinical laboratory are due to pre-analytical errors, and the highest pre-analytical error rate lies with hemostasis testing. This presentation will cover a detailed overview of the most common pre-analytical challenges facing the hemostasis lab such as under filled tubes, hemolysis, icterus and lipemia.

Saturday, March 4th 1:00– 4:30 pm Marcus Margand, Account Manager, Hemostasis, IL Laboratories Inc.

“Pre-analytical Challenges in Hemostasis Testing”

Course Outline continued: How to appropriately collect, transport and process hemostasis samples to minimize pre-analytical variables will be detailed. In addition we will cover how pre-analytical challenges directly and indirectly impact Hemostasis assays, as well as identifying suboptimal samples and the decision making process for accepting or rejecting hemostasis samples. Guidelines and regulations for proper collection, processing and storage of Hemostasis samples will be reviewed, as well as meeting current CLSI and ISO standards. We will wrap up with a review of new technology now available to the lab to automate and standardize the process of evaluating sample integrity and the rejection of suboptimal samples.

Objectives: 1) Elucidate the effect common pre-analytical errors have on hemostasis assays. 2) Present correct collection and processing conditions for hemostasis samples. 3) Review new technologies to standardize the unacceptable sample flagging and document compliances with quality standards (ISO 15189;2012).

Saturday, March 4th 1:00 - 4:30 p.m. Steve Schmiedel, CLS, ASCP, Application Consultant-Hemostasis, IL Laboratories Inc.

“Heparin Induced Thrombocytopenia”

Course Outline: This presentation will cover the clinical aspects of Heparin Induced Thrombocytopenia (HIT), which is an adverse reaction to heparin which can be potentially life threatening, and if left untreated, the risk for significant morbidity and mortality is high. Being that it is one of the most common of all adverse drug events, due to the sheer volume of patients receiving heparin therapy, the critical goal for the Clinician is to quickly identify patients with HIT and switch them for Heparin to an alternate anticoagulant.

Objectives: 1) Define the main clinical aspects of HIT, including pathogenesis and frequency. 2) To recognize when to suspect a patient with HIT, including discussing the main types of HIT, current evaluation protocols (4-T score) and laboratory assays. 3) Outline current diagnostic and treatment practices. 4) Describe how rapid, On-demand testing improves quality of care while reducing healthcare costs.

“Hemostasis 101– A beginning Journey”

Course Outline: Understanding the basics of Coagulation or Hemostasis is crucial for all health care professionals, and in the laboratory setting, is especially useful to recognize its concepts and utilities, since any patient on blood thinning agents will need to be monitored via basic Coagulation assays. In addition, we will discuss being able to identify deficiencies or excesses in certain coagulation proteins, could lead to excessive clotting or bleeding, thus being able to discriminate between the two scenarios is of utmost importance.

Objectives: 1) Describe an overview of the Coagulation Cascade. 2) Discuss the importance of Hemostasis balance between thrombotic (clotting) and Fibrinolytic (breakdown of clotting) pathways. 3) Evaluate the most commonly used conventional coagulation assays. 4) Describe how clotting reaction takes place, *In Vitro* (i.e. in a laboratory setting).