Lab Subcommittee Meeting Minutes (June 7, 2011)

Participants
Gary Budnick (CT)
Arthur Kazianis (MA)
Tracy Stiles (MA)
Jemelie Bessette (ME)
Carol Loring (NH)
Bob Ireland (RI)
Sherry French (VT)
Jaya Mathur (JSI)

A. Progress toward regional objectives
    a. Repeat Testing *(Objective 4.1 – 100% of laboratories will ensure minimal standards for additional testing on all positives in conformance with CDC laboratory guidelines)*
        i. Most labs are waiting for the new lab guidelines to be released before addressing repeat testing protocol
        ii. VT and ME continue to conduct repeat testing
            1. VT repeats with a single
        iii. Labs have to follow product insert criteria
            1. ME's product insert states that repeat testing should only be conducted in certain circumstances
            2. The BD product insert references 2002 testing guidelines
        iv. Have all states had a CLIA inspection since the Dr. Fenton letter was released?
            1. All states have had an inspection except for Conn
            2. NH did a retrospective study on patients since 2004 who were repeat tested after a discrepant result
                a. 95% of these patients were negative at the next appointment, which is evidence that reporting of the negative test result was accurate result
                b. Charlie Reynolds, CLIA Inspector, was satisfied with the study results
        v. Conn repeats GC (though how long it will continue to do so is unclear)
        vi. Now and then, Conn sees low positive GCs that do not confirm
        vii. Should the lab subcommittee keep this objective?
            1. The subcommittee may want to change the wording of this objective once the new guidelines are released
            2. Currently, all states are in compliance
    b. Transit Time *(Objective 3.3. – 60% of sample specimens will be received in the lab within 3 calendar days from date of specimen collection; 95% will be received within 6 calendar days of date of specimen collection)*
        i. As a region, labs have met the 60% at 3 days and 90% at 6 days
            1. Some states are not meeting that objective
            2. NH did an analysis of transit times for all of 2010 because it was not meeting the objective
                a. The increase in transit time is clearly related to the loss of NH's courier
                b. NH pulled language from the offenders letter and Dr. Fenton's letter and wrote a letter to the clinic with the transit time violation

i. NH referenced the specimens in violation and recommended that the site repeat test those patients (because transit time was well beyond the recommended transit time of 30 days)

c. NH implemented a new spreadsheet that automatically calculates transit time
    i. The lab can look at the spreadsheet daily
    ii. The lab now automatically rejects specimens that arrive with a transit time of over 30 days
d. NH did a chart of transit time by site and gave each site a report card of its transit time performance
e. One or two clinics have hired their own courier; other sites put the specimens in the mail
    i. Some sites hold on to specimens until they have a certain number to mail
    ii. If sites think that specimens will not be rejected, they will hold on to them
f. The lab is pushing for a new courier
g. NH does not expect to meet the 3 day objective, but is hoping it can meet the 6 day objective

3. Offenders Letter
    a. The offenders letter is now final
    b. This letter will be submitted to sites known to be transit time offenders
    c. This is a targeted way of improving transit time
    d. Arthur will make sure to email the latest version
    e. It might be best for each lab to copy and paste the body of the letter into individual lab letterhead
    f. Each lab might also want to personalize the letter a bit to reflect unique state circumstances

c. Priority Area 4 *(Promote the use of high-quality, cost-effective diagnostic tests for chlamydia)*
    i. Does the subcommittee want to add a new objective under this priority area regarding rectal and pharyngeal testing?
        1. The question is how this new objective would correspond to the IPP mission
        2. The subcommittee may discuss this with Steve Shapiro
    ii. Does the subcommittee want to add a new objective under this priority area regarding environmental testing and/or other quality assurance (QA) activities?
        1. Some states do environmental swabs every month
        2. States generally can tell if there is contamination by a spike in positivity
        3. Arthur will share the MA contaminant/retesting protocol with NH (since NH does not have protocol)
        4. Maybe the subcommittee should change this priority area to reflect QA policies and prevent contamination
            a. The current language is antiquated
            b. This will be added to the agenda on the September subcommittee conference call
d. Turnaround Time *(Objective 3.2. 95% turnaround time within 3 working days from receipt of specimen in lab to reported results)*

i. As a region, labs missed the target of 95% (had 91%)
ii. NH possibly skewed the data because it did not account for weekends and holidays
    1. NH will redo the data and send it back to Arthur
iii. Tracy Stiles has PPT instructions on how to formulate calculations, which she will send to entire group
iv. Conn is ahead of the curve on testing, but reporting takes longer
    1. Conn has put pressure on data entry
    2. Conn now calls in results, but should maybe switch to fax
        a. RI autofaxes results to sites (i.e. when the laboratorian finishes test, the results are reviewed and then automatically sent to client upon approval)