

Amendments to clinical services and alterations to testing protocols

Stock Ordering for Surgeries

When ordering stock for the surgeries at UHND/DMH, the surgeries must email:

cdda-tr.pathlabsuppliesuhnd@nhs.net

AND

cdda-tr.pathlabsuppliesdmh@nhs.net



Transport of Samples



UN3373 regulations for the transport of biological substances are set through the P650 packaging instructions which state:

The packaging shall consist of at least three components:

- (a) A primary receptacle (sample container)
- (b) A secondary packaging (sample bag)
- (c) An outer packaging (transport carrier)

Either the secondary or the outer packaging must be rigid. All samples should be transported in carrier boxes which all pathology drivers are supplied with.

Samples travelling by taxi should be sent using an outer container that is rigid and concealed so that no patient identifiable information can be seen to ensure confidentiality and information governance.

The laboratory team are working with CCG leads to ensure sample integrity is maintained whilst samples are waiting on courier pick up. To help with this issue please ensure that samples for Biochemistry, Haematology or Immunology that are awaiting pick up are not stored in fridges. This affects the potassium and other analytes. Please also ensure that the phlebotomy order of draw is followed to prevent contamination of samples. To support GP services in timely awareness and management of abnormal results phoned to out of hours services, the blood sciences management team have worked closely with GP colleagues to provide an understanding of the process and a new failsafe.

Sample bag requirements

Pathology provide the GP surgeries with 3 different types of ICE bags to attach to the relevant ICE form with the correct samples in, these bags are identical to these pictured below:



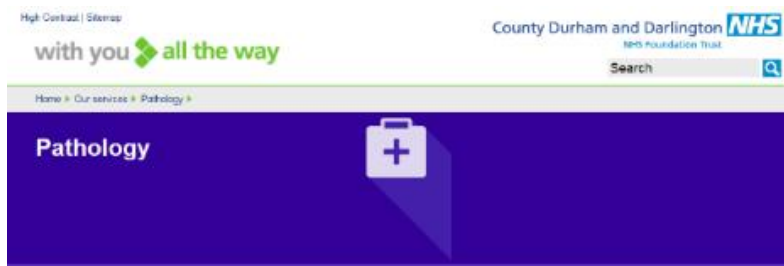
These bags are clearly marked to highlight which samples they relate to the use of, we have seen a high incidence of incorrect use of bags which is leading to a delay in patient results.

Blood Sciences (Biochemistry, Haematology and Immunology) samples which have been placed in blue microbiology bag can then end up in the microbiology department. Their work flow is not the same as blood sciences so it can be delayed returning to the correct department which then means samples may be delayed or in some circumstances cancelled, resulting in the patient having to be re-bled.

Urgent samples MUST go into a red ICE bag so that they can be easily identified and picked out and treat urgently.

Handbook

The Pathology Handbook is a great tool for all users to access information regarding all services available through pathology. The handbook page can be accessed through the trust internet site and also the link below. We would



welcome any feedback regarding this function of our service, to help improve the quality if of the service given to users. All enquiries should be forwarded to the Pathology Quality Manager Rebecca.sedman@nhs.net

[Please Click Here to Access the Pathology Handbook](#)

Labelling ICE Blood Samples

Staff time has been taken up due to many poorly labelled samples in the blood sciences department. Samples need to be labelled with care to avoid sample rejection and mislabelling errors.

Printer-related Issues



Too faint, or blurred – lack of toner/ink in the printer means the barcode readers cannot differentiate between the black and white lines adequately. This is by far the most common issue. Also, we have noted some printers produce black lines with wavy or fuzzy edges – unless these edges are sharp and well-defined they cannot be read, and the printer should be substituted with another one.

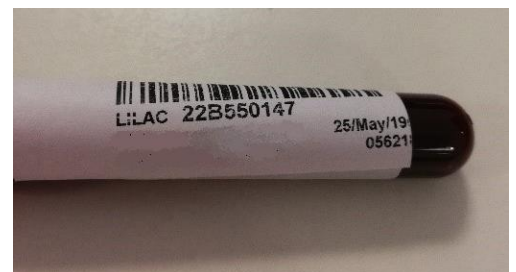


White space above or below barcode too narrow – barcode readers need to ‘see’ a white space at both ends of a barcode to tell them when to start and stop reading. If the white space is too narrow (roughly less than 5mm), the barcode cannot be read. This normally occurs if the labels are not correctly aligned in the printer.



Too dark – More rarely, the black lines can be too heavy, again causing problems in differentiation between black and white lines by the barcode readers.

Label cut off - As you will be aware our Trust policy requires that there are three full demographics on the form and the sample for us to meet patient identification criteria. You will see from the example above that there is a problem with a printer within a surgery and this needs to be addressed. The full hospital number and date of birth cannot be seen on the sample and so it does not meet the requirements.



Positional – ICE labels should be applied as vertically as possible, our barcode readers cannot read a barcode wrapped around a tube in a spiral, or horizontally. Also, if the ICE label is positioned too far down the tube (i.e. away from the cap) it can be partially obscured (and therefore be unreadable) by the pucks which transport the sample around the Biochemistry sample track.

Samples in the laboratory are placed into pucks. The barcodes need to be clearly above the top of the puck. Barcodes must be near the top of the tube.

Handling Related Issues

Torn barcodes – a torn barcode cannot be successfully re-affixed, as the tear interrupts the barcode – please reprint if possible.

Smudging – over handling can easily smudge the barcode, making it unreadable – try to avoid touching the barcode itself.

Wrong (or No) Suffix – hidden within the barcode is a letter suffix which indicates to the lab barcode readers what the sample type is, this is important as certain tests can only be done on specific sample types, e.g. S for Serum, G for Glucose samples. ICE labels clearly state the cap colour (YELLOW, GREY, LILAC etc.) – affixing a GREY label to a yellow top tube for instance risks the wrong tests being done on that sample type.



Laboratory News

UKAS Accreditation

CDDFT Pathology Laboratories are mainly accredited to ISO 15189:2012, however due to the nature of the way in which UKAS grants accreditation, it is the test that is accredited and not the laboratory.



UKAS maintains a register of laboratories that are accredited to ISO 15189:2012, which can be accessed via the UKAS website (<https://www.ukas.com/search-accredited-organisations/>). The UKAS website holds a schedule of accreditation for the laboratory that lists the individual tests for which the laboratory are currently accredited for. Other tests may be awaiting completion of Extension to Scope (i.e. new test that is in the process of being added to the schedule of accreditation) and / or transitioning from CPA accreditation to UKAS. Therefore pathology reports may contain a combination of accredited and unaccredited tests.

Please be assured that it is normal practice for laboratories to be accredited for a number of tests; however there could be a number of tests that are unaccredited. This does not necessarily indicate that these tests are of inferior quality, the tests have the same level of internal and external quality assurance associated with them, and they are just yet to be officially accredited by UKAS.

Users of the CDDFT pathology service may wish to be certain that all tests they are sending for analysis are accredited by UKAS. This information can be obtained using the link above to the UKAS website. After viewing the UKAS Schedule of Accreditation, if you would like to discuss the accreditation status of any of our tests please contact the Pathology Quality Manager initially to discuss, and if further assurance or information is required (i.e. how we assure quality results for the test) this information can be provided upon request from the departmental lead rebecca.sedman@nha.net

All Departments

Changes to requirements on request forms:

Please could we request that for all community samples, the unique practice number (eg. A83.....) is used on the request form. This avoids incorrect surgeries being selected in error when old names or nicknames are used on the request forms. This not only causes a delay in patient results being sent to the correct place but presents a potential information governance issue. A list has been provided at the end of this newsletter.



Microbiology

Changes to urine testing:

As of March 6th 2023 the microbiology department will be re-instating automated microscopy testing of all urine samples requesting investigations into infection.

The IQ200 Sprint automated urine microscopy analyser will be reintroduced into routine testing of urine samples and will enable the department to perform accurate cell counts in a standardised way. Automated urine microscopy improves turn-around-times as negatives can be screened out and reported the same day. Urine samples will still receive culture and sensitivities performed if microscopy results indicate infection or if clinical picture requires this. Please refer to the urine page on the pathology handbook (attached) for further details on the relevant clinical information to provide.

To implement this change the laboratory will only be able to accept **red-topped boric-acid tubes** for urine culture and sensitivity. Stocks of these containers are currently available from suppliers via NHS Supply Chain and Cardea. The microbiology department will resume cancellation of white-topped urines for microscopy, culture and sensitivity, as per routine policy, from the 13th March 2023.

Please note there are NO changes for other tests on urines which require white topped containers, e.g. biochemistry samples. Please refer to the pathology handbook for individual test requirements: [County Durham and Darlington - Pathology \(cddft.nhs.uk\)](https://www.cddft.nhs.uk)

Post-operative spinal wound infections:

If patient has had a spinal operation at RVI, Newcastle, and post-operatively presents with signs of spinal wound infection (discharge/cellulitis/temperature) then please encourage the patient to contact their spinal team at RVI as per instructions in their discharge letter. Please do not commence antibiotics. Superficial wound swab culture may not be indicated as deep wound sampling is more appropriate. This can be achieved by the spinal surgeons after clinical assessment which also helps them decide if deep wound washout is needed at the earliest.

Biochemistry

Changes to 'Add-On' requests:

To help cope with demand within clinical biochemistry there are some changes to our add on processes and requests for results.

The laboratory will be unable to give results out over the telephone before 11am. Clinically abnormal results will continue to be telephoned as per the Trust protocol. If there is a clinical need for results before 11am, and these are not available electronically, please contact the duty biochemist through the Trust switchboard.

Any requests to add on tests to any Biochemistry sample must be emailed to cdda-tr.biochemistry@nhs.net. No requests for add-ons will be accepted by telephone.

This email address can also be used for any clinical queries but should not be used for enquires about results. The laboratory will be unable to give results out over the telephone before 11am. Clinically abnormal results will continue to be telephoned as per the Trust protocol. If there is a clinical need for results before 11am, and these are not available electronically, please contact the duty biochemist through the Trust switchboard.

There is an increasing number of calls for sample requirements. Please can I take this opportunity to remind teams that sample requirements can be found on the Pathology Handbook - [County Durham and Darlington - Pathology \(cddft.nhs.uk\)](http://cddft.nhs.uk)

If there are any questions please let me know via email hazel.borthwick@nhs.net or 01325 743244.

Results not fitting clinical picture:

Please can we ask that if a result doesn't fit the clinical picture, can you contact the laboratory to share your concerns so that we can investigate any analytical errors as soon as possible whilst also potentially still having the sample in question to re-analyse. Despite thorough quality control procedures, technical errors still occur and it is beneficial to both teams if we can identify errors quickly. Use the biochemistry email or contact the duty biochemist through switch board.

Patient access to results:

With an increase in the patient access to results can all surgeries please remind patients that the GP surgery must be contacted for information relating to their results. The laboratory staff cannot offer clinical/interpretative advice on results issued directly to patients. We are receiving increased numbers of phone calls for information and would appreciate your support in signposting patients back to your teams.

Increases in potassium due to delayed transit to the laboratory:

Please can GP teams ensure that bloods taken in the morning are sent on the first available courier. If potassium is of clinical concern please it is advisable for patients be bled nearer courier times or use green top lithium heparin bottles for U&E's as these are better at reducing the movement of potassium out of cells. We are working with the commissioning teams to review implementing centrifuges for those practices who are further from the laboratory to help reduce those with artefactually raised potassium results.

New methods for Immunoglobulins:

Please note that new methods for Immunoglobulins A, G and M went live from the 11th of April. There is no change to reference intervals.

Intelligent Liver Function testing:

The 'intelligent' liver function (iLFT) testing algorithm was first developed in NHS Tayside and increases the diagnosis of liver disease by more than 40% and has demonstrated savings to patient care. Using improved first line profile assessment and IT rules to support further testing, laboratories can develop iLFT's to support earlier/improved diagnosis and advice on first line testing, reduced need for repeat testing, more appropriate patient follow up and reduce the morbidity, mortality and cost associated with late presentation.

Within CDDFT the clinical laboratory team and Gastroenterology team have been working to develop an iLFT algorithm to follow the Liver Network guidance for the management of adults with asymptomatic liver blood test abnormalities. The team are aiming to launch this in May so further information will be sent around practices in due course. For further information contact hazel.borthwick@nhs.net

Haematology & Transfusion




STOP, THINK, ANTICOAGULANTS!

Taking a coagulation screen or light blue top sample?

Remember to let us know if your patient is on Anticoagulant Therapy

- **Less phone calls** to your ward, reduce the 'can you check if this patient is on any anticoagulants?' phone calls from the lab.
- **Faster turnaround times:** results are held in a queue while we phone you to find out if a patient is on anticoagulants. This can often delay an urgent sample over the 1 hour turnaround time.
- **Fewer interruptions:** less calls from the lab asking you to confirm if a patient is on anticoagulant therapy.
- **Reduces unnecessary testing:** no further investigations are required for an extended Prothrombin time (PT) or Activated Partial Thromboplastin Time (APTT) if a patient is on anticoagulant therapy

Add this info to the clinical diagnosis box when requesting your samples



REQUESTING OR TAKING A D-DIMER?

- Remember to document:
 - Is the patient is on the DVT pathway?
 - Is the patient is on any anticoagulant therapy? If yes, document which anticoagulant the patient has been prescribed.
 - Any relevant clinical details – try not to use 'GP request' as this does not provide any relevant details when we pass an abnormal D-Dimer result onto GP out of hours service or urgent care centres.

Andrology service (Post Vasectomy Semen analysis (PVSA) testing)



Due to issues relating to Covid-19, we are currently unable to provide an andrology service for GP patients.

This is largely due to the health and safety guidelines for the andrology processes themselves. We're working to ensure that we can safely reintroduce the service as soon as possible and will update you further in the next few weeks with details of how we plan to reintroduce the service

safely, and referral criteria.

If further advice or information is required, please contact Mrs Jennifer Siddall, Cellular Pathology Department Manager 01913332447.

Cost Centre Codes for Pathology POC Supplies

As you know, it is now necessary for you to provide a cost centre code when receiving POC supplies from Pathology.

This has been going quite well, but there have still been a few instances when people have turned up without a code, causing frustration.

Could I therefore please request that you ensure everyone coming to the lab for supplies knows the code before they get here?

An easy way to do this would be to write your own cost centre code onto the appropriate stock list (e-mailed to wards earlier) and then use this as a pro forma for all future requests.



General Enquiries

Working with Us

We are always keen to hear from our user's especially on aspects of our service that either you appreciate or where you feel we could do better. With this in mind we would like to arrange Innovation and Service User Feedback sessions. If this is something you would be interested in taking part in please contact:

cddft.pathologyquality@nhs.net

Pathology Quality Manager

Rebecca Sedman

Tel: 0191 33211

Email: Rebecca.sedman@nhs.net



We Welcome Your Feedback, if you would like to complete our survey please click [here](#)

List of GP Practice Codes

CCG	Code	Name
AIRDALE,WHARF,CR CCG	B82023	CATTERICK VILLAGE SURGERY
AIRDALE,WHARF,CR CCG	B82029	ALDBROUGH ST JOHN SURGERY
AIRDALE,WHARF,CR CCG	B82035	SCORTON SURGERY
AIRDALE,WHARF,CR CCG	B82072	THE FRIARY SURGERY RICHMOND
AIRDALE,WHARF,CR CCG	B82104	HAREWOOD MEDICAL PRACTICE
DARLINGTON CCG	A83005	WHINFIELD SURGERY DARLINGTON
DARLINGTON CCG	A83006	ORCHARD COURT SURGERY
DARLINGTON CCG	A83010	MOORLANDS SURGERY DARLINGTON
DARLINGTON CCG	A83013	NEASHAM ROAD SURGERY DARLINGTON
DARLINGTON CCG	A83031	CARMEL MEDICAL PRACTICE DARLINGTON
DARLINGTON CCG	A83034	BLACKETTS MEDICAL PRACTICE
DARLINGTON CCG	A83040	CLIFTON COURT MED CENTRE DARLINGTON
DARLINGTON CCG	A83047	DENMARK STREET SURGERY DARLINGTON
DARLINGTON CCG	A83048	ROCKLIFFE COURT SURGERY DARLINGTON
DARLINGTON CCG	A83070	ST GEORGE'S MED MIDD. ST GEORGE
DARLINGTON CCG	A83641	PARKGATE SURGERY DARLINGTON
DDALES,EAS,SEDG CCG	A83001	ST ANDREWS MED PRACT
DDALES,EAS,SEDG CCG	A83003	WILLINGTON MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83007	BLACKHALL & PETERLEE PRACTICE
DDALES,EAS,SEDG CCG	A83008	HALLGARTH SURGERY SHILDON
DDALES,EAS,SEDG CCG	A83012	WILLIAM BROWN CENTRE
DDALES,EAS,SEDG CCG	A83015	STATION VIEW MEDICAL CENTRE B.A.
DDALES,EAS,SEDG CCG	A83020	NORTH HOUSE SURGERY CROOK
DDALES,EAS,SEDG CCG	A83021	AUCKLAND MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83025	BISHOPGATE MEDICAL CENTRE B.A.
DDALES,EAS,SEDG CCG	A83032	WOODVIEW MEDICAL PRACTICE
DDALES,EAS,SEDG CCG	A83035	STANHOPE MEDICAL CENTRE
DDALES,EAS,SEDG CCG	A83035001	WOLSINGHAM SURGERY
DDALES,EAS,SEDG CCG	A83037	BEWICK CRESCENT - NEWTON AYCLIFFE
DDALES,EAS,SEDG CCG	A83041	MURTON MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83043	MIDDLETON-IN-TEESDALE SURGERY
DDALES,EAS,SEDG CCG	A83045	DR.OAKENFULL & PARTNERS FERRYHILL
DDALES,EAS,SEDG CCG	A83045001	CHILTON HEALTH CENTRE
DDALES,EAS,SEDG CCG	A83046	BARNARD CASTLE SURGERY
DDALES,EAS,SEDG CCG	A83052	BISHOPS CLOSE MEDICAL PRACTICE
DDALES,EAS,SEDG CCG	A83054	SKERNE MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83057	EAST DURHAM MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83060	PINFOLD MEDICAL PRACTICE

DDALES,EAS,SEDG CCG	A83061	GAINFORD SURGERY
DDALES,EAS,SEDG CCG	A83066	JUBILEE MEDICAL GROUP NTON AYCLIFFE
DDALES,EAS,SEDG CCG	A83074	DR.CLARK & PARTNERS PEASE WAY
DDALES,EAS,SEDG CCG	A83075	BYRON MEDICAL PRACTICE
DDALES,EAS,SEDG CCG	A83610	WINGATE MEDICAL PRACT INTRAHEALTH
DDALES,EAS,SEDG CCG	A83616	BEVAN MEDICAL GROUP
DDALES,EAS,SEDG CCG	A83619	SOUTHdene MEDICAL CENTRE
DDALES,EAS,SEDG CCG	A83626	EVENWOOD SURGERY
DDALES,EAS,SEDG CCG	A83634	WEST CORNFORTH SURGERY
GATESHEAD CCG	A85008	BIRTLEY MEDICAL GROUP
GATESHEAD CCG	A85024	THE CARE CENTRE CHOPWELL
GATESHEAD CCG	A89012	THE GALLERIES HEALTH CENTRE
NORTH DURHAM CCG	A83009	BRIDGE END SURGERY CHESTER LE ST
NORTH DURHAM CCG	A83011	CLAYPATH & UNIVERSITY MEDICAL GROUP
NORTH DURHAM CCG	A83014	BELMONT SURGERY DURHAM
NORTH DURHAM CCG	A83014001	SHERBURN SURGERY DURHAM
NORTH DURHAM CCG	A83016	TANFIELD VIEW SURGERY
NORTH DURHAM CCG	A83018	CONSETT MEDICAL CENTRE
NORTH DURHAM CCG	A83022	SIR BOBBY ROBSON HOUSE
NORTH DURHAM CCG	A83022001	MEADOWFIELD SAWMILLS LANE
NORTH DURHAM CCG	A83022003	ESH WINNING MACKENZIE HOUSE
NORTH DURHAM CCG	A83022004	USHAW MOOR MILLYARD HSE
NORTH DURHAM CCG	A83022005	TOW LAW CHARLTON HSE
NORTH DURHAM CCG	A83023	STANLEY MEDICAL GROUP CLIFFORD RD
NORTH DURHAM CCG	A83024	THE SURGERY WEST RAINTON
NORTH DURHAM CCG	A83026	THE SURGERY, SACRISTON
NORTH DURHAM CCG	A83027	COXHOE MEDICAL PRACTICE
NORTH DURHAM CCG	A83028	GROUP PRACTICE SURGERY MIDDLE CHARE
NORTH DURHAM CCG	A83028001	WOODLANDS SURGERY RICKLETON
NORTH DURHAM CCG	A83029	THE SURGERY GREAT LUMLEY
NORTH DURHAM CCG	A83030	DUNELM MEDICAL PRACTICE
NORTH DURHAM CCG	A83030001	GILESGATE DURHAM (DUNELM)
NORTH DURHAM CCG	A83030002	MEDICAL CENTRE, FRAM MOOR (DUNELM)
NORTH DURHAM CCG	A83033	THE SURGERY, PELTON LAVENDER CENTRE
NORTH DURHAM CCG	A83033001	PELTON FELL FELLROSE
NORTH DURHAM CCG	A83036	CHASTLETON FRAMWELLGATE MOOR
NORTH DURHAM CCG	A83038	CEDARS MEDICAL GROUP BURNOPFIELD
NORTH DURHAM CCG	A83049	QUEENS ROAD SURGERY CONSETT
NORTH DURHAM CCG	A83050	CESTRIA HEALTH CENTRE CHESTER LE ST
NORTH DURHAM CCG	A83055	CHEVELEY PARK MEDICAL CTR DURHAM
NORTH DURHAM CCG	A83072	LANCHESTER MEDICAL CENTRE

NORTH DURHAM CCG	A83073	DRS LAMBERT& BRUNT 9 WEST RD A.P.
NORTH DURHAM CCG	A83073001	LAMBERT - LOUISA SURGERY, STANLEY
NORTH DURHAM CCG	A83617	BROWNEY HOUSE SURGERY
NORTH DURHAM CCG	A83618	OAKFIELDS HEALTH CENTRE
NORTH DURHAM CCG	A83618001	DIPTON SURGERY
NORTH DURHAM CCG	A83622	BURNHOPE HAVEN
NORTH DURHAM CCG	A83632	CRAGHEAD MED CTRE
NORTH DURHAM CCG	A83635	BOWBURN MEDICAL CENTRE
NORTH DURHAM CCG	A83636	LEADGATE SURGERY
NORTH DURHAM CCG	A83637	21 GARDINER CRESCENT PELTON FELL
NORTH DURHAM CCG	A83637	THE VILLAGES MEDICAL GROUP
NORTH DURHAM CCG	A83637001	PELTON OUSTON LANE
NORTH DURHAM CCG	A83639	DRS PARTHA & MALLIKA ANNFIELD PLAIN
NORTH DURHAM CCG	A83644	ANNFIELD PLAIN SURGERY DURHAM RD
SOUTH TEES CCG	A81005	SPRINGWOOD SURGERY
SOUTH TEES CCG	A81009	VILLAGE MEDICAL CENTRE