

QUALITY MATTERS

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“The Thistle website doesn’t work.”

Some lab groups use their in-house intranet. There’s nothing wrong with that, but when they can not access www.thistle.co.za it is not our website that is not working, it is their Intranet. The problem seems to be that the “refresh” button is not used often enough. Labs with this problem should contact **their IT department**. Or when they are on www.thistle.co.za via their Intranet, they can try and press F5 to try and refresh the page, but will not always work. The best option is to do it through their IT boffins.

Pathology Harmony in the UK

Harmony means happiness, doesn’t it? So what are the mad Brits up to now? Well, in fact this new drive is designed to make the users of pathology services happy – and to make the pathology service safer for patients. So, what’s been done already? The first table below shows some approved reference intervals for certain tests. A survey found that many labs had different “normal ranges” which had been adopted ages ago and left unchanged. The second table shows the recommended units for certain drugs – this because nurses and doctors are confused when labs use different units.

Table 1

Analyte	Range	Units
Serum sodium	133-146	mmol/l
Serum potassium	3.5-5.3	mmol/l
Serum urea	2.5-7.8	mmol/l
Serum albumin	35-50	g/L

Table 2

Analyte	Units
Carbamazepine	mg/L
Salicylate	mg/L
Digoxin	µg/L

This is only a selection of what has been recommended. The drive seems sensible and raises many questions. First, why are we not doing this type of project here in SA? Who should drive it? Well, surely the various professional societies should be involved in anything that makes pathology a more logical and useful service? And finally, should Thistle adopt the drug units recommended in our database and reports? Oops, even more confusion, I think! Any comments from out there?

By Dr Jim McCulloch

Hematocrit

There is considerable confusion regarding the reporting of HCT on the Haematology EQA. PLEASE tell us what unit you use AND then use that one only! Our database is being “screwed up” by people confusing units. As a guide:

If you are registered for %, your result will be a big figure, like 40 or 45.

If you are registered for l/L your result will be a wee figure, like 0.4 or 0.45.

Hopefully now Marlice can stop sending out letters explaining this concept!

LATE RESULTS – FIRST WARNING

I read in a newspaper this morning that a Johannesburg school has started locking out pupils who arrive late. Apparently out of 900 pupils, an average of 450 arrived late every day.

Well, our equivalent are late results and we will begin “locking them out” next year.

We will stop accepting late results for ALL programmes starting with the Chemistry/ Haematology cycles that begin in March 2009.

Our cut-off dates, listed on all instruction sheets will be strictly adhered to, as they should have been from the beginning. Late results have caused us to set up an entire industry to enter them, process the relevant week’s results and then explain to those whose results were on time, why their blob on the Levey-Jennings charts “moved” from one sample to another.

So, what now? If the cut-off date is too close to the analysis date for you to get results back to us, then either analyse the samples earlier or start to use the web site entry facility.

Reports will be issued to all labs enrolled in a particular EQA and if your result was not received before the cut-off the report will state that. You will need to calculate your own SD or deviation from the means for your result.