

Twelfth Annual Educational Conference
Loveland, Colorado
Co-Sponsored by:
The Rocky Mountain POC Network
American Society of Clinical Laboratory Science

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# Southwest Regional Point of Care Group, Inc. Mission Statement

Point of Care patient testing is the largest expanding laboratory activity in the industry today. Patients and providers have access to laboratory testing results with short turnaround time. Although these tests are simple, they must be accurate to assure quality patient care. An educational opportunity for individuals responsible for the administration of Point of Care is limited in the Southwest.

With the Southwestern region of the United States serving a large geographical and culturally diverse area, it is our goal to help provide education and networking resources for point of care coordinators and others associated with the point of care industry. Our goal is to enhance point of care for the patient through education and networking.

### CONTINUING EDUCATION CREDITS

The Southwest Regional POC Group is approved as a provider of continuing education programs in the clinical laboratory sciences by the ASCLS P.A.C.E. Program.

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Independent Consultant

Denver, Colorado ASCLS-CO P.A.C.E.<sup>©</sup> Coordinator

Fort Collins, Colorado

# **Meeting Agenda**

# Thursday, September 18, 2011

	SWRPOCG Educational Conference
12:00	Registration

# 12:30 Antibiotic Resistance and Infection Control Policies Dr Norman Moore Objectives: 1. Understand the medical impact of the indiscriminate use of antibiotics 2. Understand how diagnostics can be applied to disease states like pneumonia so use of broad spectrum antibiotics can be limited. 3. Understand how infection control policies can prevent the transmission of resistant bacteria Contact Hours: 2.0 hours 2:30 Break with Vendors

# 3:00 Regulations and Challenges of Legal Marijuana Jeff Groff, Colorado Department of Public Health and Environment Objectives:

Objectives:

1. Become familiar with the marijuana testing laboratory quality

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- 2. Understand the types of testing being conducted on marijuana products
- 3. Gain exposure to the marijuana laboratory certification process

Contact Hours: 2.0 hours

7:00
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# Friday, September 23, 2011

	MORNING
8:00	SWRPOCG Business meeting with Breakfast
8:30	LEAN Techniques for Choosing POC Tests
	Sandy Fiscus, MBA(HSM), MT(ASCP)
	Objectives:
	1. List 3 basic lean techniques.
	2. Complete one example of a point of care test request form.
	3. Discuss ways to coordinate discussions with other departments about
	using point of care tests.
	Contact Hours: 1.0 Hours
9:45	Break with Vendors

10:30	The Role of Lactate in the Risk Assessment of Morbidity and Mortality
	Jim Aguanno, PhD, Siemens
	Objectives:
	1. Understand the role of lactate as a prognostic indicator for morbidity and mortality
	2. Identify disease states where lactate testing can add significant clinical value
	3. Understand the differences between the systemic inflammatory response (SIR) and sepsis, severe sepsis and septic shock
	4. Understand the urgency associated with assessing lactate level
	Contact Hours: 1.0 hours

12:00	LUNCH with Vendors
1:00	Affordable Care Act and POC Testing
	Mark A. Levine, MD, FACP Chief Medical Officer, Denver
	Centers for Medicare and Medicaid Services
	Objectives:
	1. Describe the 3 intertwined goals of health care delivery transformation
	Describe the major activities of the Center for Medicare and Medicaid     Innovation
	3. Describe the major impediments to health care delivery transformation
	Contact Hours: 1.5 hours
2:30	IQCP and Assessing Competence
	Margi Haas, MT(ASCP) CMS Regional Office
	Objectives:
	1. Understand the principles of IQCP and personnel competency.
	2. Provide Background & History of CLIA Quality Control
	<ul> <li>Describe the Development of IQCP</li> </ul>
	<ul> <li>Present an Overview of Policies and Interpretive Guidelines related to</li> </ul>
	IQCP
	Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for Individualized Quality Control  Output  Describe the Implementation Plan for In
	Plan (IQCP) – Education & Transition Period
	3. Perform a Competency Assessment on each staff member in the
	laboratory.
2.45	Contact Hours: 1.5 Hours
3:45	Wrap Up
4:00	Adjourn

# **Speaker Biographies**

# Norman Moore, Ph.D

Dr. Moore received his Bachelor's Degree in biology and philosophy from Dartmouth College and his PhD in microbiology from the University of New Hampshire. While at Digene Diagnostics, he worked on an assay for human papillomavirus, the etiological agent for cervical cancer. At GeneTrak Systems, he commercialized a test for *Salmonella* in the food industry. He went to work for Binax where as a senior scientist; he developed the first ever rapid tests for *Legionella* and *S. pneumoniae*, both of which are now recommended by the Infectious Disease Society of America for use in severe pneumonia cases. He became the R&D director where he developed tests for diseases such as influenza and RSV. Binax was acquired by Alere, formerly Inverness Medical where he then took on the role of scientific affairs for infectious diseases. He has served on multiple NIAID grant committees, the CDC guideline group for rapid influenza testing, and the Clinical Laboratory Standards Institute guideline committee for point-of-care infectious disease. He currently has six patents and numerous publications and presentations.

# Jeff Groff, MT (ASCP)

Jeff is the Laboratory Certification and the Evidential Breath Alcohol Testing (EBAT) Program Manager. Responsibilities include the regulatory oversight for over 3500 laboratories located within and outside of Colorado. These include medical or diagnostic labs under CLIA, environmental labs under the EPA Safe Drinking Water Act, milk and dairy labs under the FDA Grade A Pasteurized Milk Ordinance, forensic toxicology labs performing testing for DUI/DUID applications and recently, Retail Marijuana Testing Facilities.

In addition, Jeff is responsible for the administration of Colorado's DUI/DUID program. The EBAT program provides the 200 breath testing instruments used statewide, train and certify over 5000 officers and annual inspect 165 law enforcement agencies statewide. All results (blood or breath) submitted as the state's evidence in a DUI/DUID case must meet the regulatory and quality requirements established by Jeff and his staff at CDPHE.

Jeff has worked in laboratory sciences since 1989 (25 years) with 22 of those years with the state of Colorado. This includes working in diagnostic, reference and NIH research labs prior to becoming a lab inspector in 2005.

### Sandy Fiscus, MBA(HSM), MT(ASCP)

Sandy worked with point of care testing for the past 20 years, first as the quality and compliance coordinator, then as the Point of Care Testing Manager (Coordinator). During both of these roles, she used lean techniques to decide if, when, and where testing should be performed to assist care givers with laboratory testing in hospital and clinic settings. During the past two years, she provided expertise in laboratory science to healthcare providers and industry leaders.

### Margi Haas, MT(ASCP)

CLIA Program Coordinator, Denver Regional Office of CMS

- •Performed bench work, managed laboratories, and been quality assessment manager for 30 years before becoming a state CLIA surveyor and then a Federal Surveyor for CMS.
- •Worked in many different environments over the years from a solo practitioner's office, to group practices, hospitals, a regional reference laboratory, and an international reference laboratory with clinical trials.
- •Participated in development of the training program "CMS Introduction to IQCP Training Baltimore, November 2013".

# Mark A. Levine, MD, FACP

Mark A. Levine, MD, FACP, is the Chief Medical Officer in the Denver office of the Centers for Medicare and Medicaid Services. A quality improvement coach for the agency, he is active in developing and maintaining agency initiatives in clinical quality, payment reform, value-based payment and delivery system innovation.

An alumnus of Rutgers College and Temple University School of Medicine, Dr. Levine completed residency training in Internal Medicine at the Hospital of the University of Pennsylvania and fellowship in Clinical Immunology at the University of Colorado. Dr. Levine founded the Colorado Patient Safety Coalition. He serves as Clinical Professor at the University of Colorado School of Medicine and the Colorado School of Public Health, teaching in areas of clinical geriatrics, quality, health systems and ethics. Dr. Levine served for many years as a delegate to the American Medical Association and as member and past chair of its Council on Ethical and Judicial Affairs, steward of the AMA Code of Medical Ethics. Dr. Levine practiced general internal medicine in the Denver area for many years in a variety of practice settings; solo, small group, large group and integrated group. He co-founded and developed a large physician group practice. He has broad experience in managed care with service as an IPA and HMO medical director. Through this varied, deep and practical knowledge and experience, he recognizes the many challenges and opportunities facing American health care in the evolution of safe, effective, timely, equitable, patient-centered and efficient medical care.

# Jim Aguanno, PhD

Dr. Aguanno received a Ph.D. in Biochemistry from Memphis State University. Following his Ph.D., he did two post-doctoral fellowships one at the University of Pittsburgh School of Medicine and a second at Washington University School of Medicine and Barnes Hospital in St. Louis, Missouri.

Dr. Aguanno was Director of the Core Laboratory at Baylor University Medical Center in Dallas, Texas for 24 years.

Dr. Aguanno joined Siemens Healthcare Diagnostics in January of 2004 and is currently Senior Clinical Specialist in the Disease State Management group