

# ELABORATIONS

News and Issues for Washington's Clinical Laboratories

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## 2009 MTS License Renewal

by Leonard Kargacin DOH/LQA

**C**urrent Medical Test Site (MTS) licenses expire on June 30, 2009. The MTS rules require licensees to complete the renewal process and pay the fee 30 days prior to the expiration date of the license. The license renewal process depends on the type of MTS license your facility holds. See the explanation below for your category of MTS license.

**Certificate of Waiver and Provider Performed Microscopic Procedures (PPMP):** If you hold a Certificate of Waiver or PPMP MTS license, you will only receive a renewal fee statement (mailed in April) for a two-year license. The fee statement contains information about your facility that is currently in the MTS database. Review and correct the pre-printed information and return the card with your payment to the address at the bottom of the fee statement by April 30, 2009.

**Accredited and MTS-Inspected:** For laboratories inspected by a private accrediting agency or inspected by the LQA staff, MTS license renewal is a two-step process:

- Complete the pre-renewal verification form mailed to you in early February.
- Pay the fee (based upon the information you provided on the pre-renewal verification form).

Here are some tips to facilitate the completion of the pre-renewal verification form. Return your completed pre-renewal form to the address indicated by **February 20, 2009**.

- Review and **update** the information on the first page.
  - o Check names, address(es), phone and fax numbers, and e-mail addresses listed. Correct or add as necessary.
  - o Review and update the name of the owner.
  - o Review and update the Federal Tax Identification number listed.
- SIGN on the back of the first page.
- Indicate the tests performed as requested.
- List the volume of tests performed as requested.
- Complete the questionnaire on pages 9 and 10.
- It is essential to check the information printed on the pre-renewal verification form closely for accuracy. This information is entered into the MTS computer system and the Centers for Medicare & Medicaid Services (CMS) computer system. The information in the CMS database is accessed by government reimbursement agencies, such as Medicare and Medicaid, who use the information to reimburse medical claims to providers.
- Return completed renewal packet by **February 20, 2009**.

continued on page 3

### Inside This Issue

- 2 Informed Consent for Blood Transfusion
- 3 2009 MTS License Renewal, cont'd
- 3 Basic Blood Cell Morphology Training Class
- 4 HIV Testing Diagnosis Codes/Calendar of Events

### Practice Guidelines

The following practice guidelines have been developed by the Clinical Laboratory Advisory Council. They can be accessed at the following website:  
[www.doh.wa.gov/lqa.htm](http://www.doh.wa.gov/lqa.htm)

Anemia	Lipid Screening
ANA	PAP Smear
Bioterrorism Event Mgmt	Point-of-Care Testing
Bleeding Disorders	PSA
Chlamydia	Rash Illness
Diabetes	Red Cell Transfusion
Group A Strep Pharyngitis	Renal Disease
Group B Streptococcus	STD
Hepatitis	Thyroid
HIV	Tuberculosis
Infectious Diarrhea	Urinalysis
Intestinal Parasites	Wellness

# Informed Consent for Blood Transfusion

Adapted from AABB Presentation by Robertson Davenport, MD

Informed consent is a communication process between a knowledgeable healthcare provider and a patient, NOT a document or a signature. The elements of Informed Consent should include indications for the transfusion, possible risks and benefits, alternatives, and possible consequences of not receiving the transfusion. It is desirable that the Informed Consent discussion take place well in advance of the procedure.

The duration of the consent can be for the course of the treatment, the duration of a hospital stay, or a specific time limit. Surgical consent for transfusion is usually obtained at the same time as the consent for surgery.

### Indications for Transfusion:

- Red Blood Cells – treatment for blood loss, symptomatic anemia, or poor oxygen delivery.
- Platelets – prevention or treatment of bleeding due to thrombocytopenia or platelet dysfunction.
- Plasma – treatment of coagulopathy or coagulation factor replacement.

A discussion of common and serious transfusion risks is

essential. Common risks include fever, urticaria, or pain or bleeding from the IV site. Rare, but more serious risks include HIV or hepatitis transmission, bacterial contamination, acute hemolysis, or anaphylaxis. Some patients are at risk for fluid overload, hemolytic transfusion reactions, or CMV transmission. These risks should be discussed with these patients.

Potential benefits of transfusion are improved oxygen delivery, correction of hemostatic defect, or reduced risk of bleeding. The patient should be informed of the risks of refusing the transfusion. These risks include hypoxemia or poor oxygen delivery, increased risk of bleeding, or preclusion of treatment options. Discuss alternatives to transfusion such as no transfusion, hematopoietic growth factors for platelets, autologous donation or directed donation, colloid solutions or factor concentrates for plasma, and Humate-P or DDAVP for cryoprecipitate.

Documentation of consent should include a specific consent for transfusion, the patient's signature, and a witness signature. The alternatives for the specific consent form are notes in the medical record that include all aspects of the specific form with a statement of the patient's agreement. Emergency transfusion will be handled with consideration for the patient's preference if possible but, if not, there is implied consent for emergency transfusions. Do not delay transfusions if the situation is life-threatening, and be sure to document the circumstances in the medical chart. If a patient refuses to sign a consent form, be sure to document that refusal in the medical record.

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### Website addresses:

**DOH home page:** <http://www.doh.wa.gov>  
**LQA home page:** <http://www.doh.wa.gov/lqa.htm>  
**PHL home page:**  
<http://www.doh.wa.gov/EHSPHL/PHL/default.htm>

## MTS Licenses Expire on June 30

See the article on pages 1 and 3 for specific information on the MTS license renewal process for 2009.

# 2009 MTS License Renewal, continued from page 1

- LQA will review and process your packet and send you a fee statement for the 2-year license fee. DO NOT SEND MONEY with your renewal verification.

**Questions:**

- Call (206) 418-5600
- Visit our website at <http://www.doh.wa.gov/lqa.htm>  
Click on the "Updates" sidebar.  
Scroll to "MTS License Renewal Instructions" and click on the applicable license category.

**NOTE:** If you have not received your license pre-renewal verification packet by February 16, please contact the Office of Laboratory Quality Assurance at (206) 418-5600.

## Basic Blood Cell Morphology Training Class

**Course Date:** March 19, 2009

**Course Time:** Registration begins at 8:00. Class starts at 8:15 am and ends at 3:00 pm.

**Course Content:** The lecture section of this one-day course will cover the following subjects:

- Maturation and cell function of red and white blood cells.
- Examination of red and white cell morphology using Kodachrome slides.

The laboratory section of this course includes the following activities:

- Practice making adequate smears.
- Hands-on microscopic examination of normal and abnormal blood differentials.

**Who Should Attend:** This basic course is designed for laboratory assistants, physicians assistants, nurses, and other health care providers responsible for making and evaluating blood differential smears in physician offices.

**Tuition:** \$125.00 (Before March 12, 2009) \$135.00 (After March 12, 2009).

**Continuing Education Units:** Students receive 0.6 CEUs for completion of this course. Applicants must attend the entire workshop to receive CEU's. Accreditation provided through the State of California Department of Health Services, Office of Laboratory Field Services, 2151 Berkeley Way- Annex 12, Berkeley, California 94704-1011.

**Location:** The courses are held at the PHL in Shoreline, Washington. A map and driving directions will be sent to each registered student. All breaks, laboratory materials, manuals, and use of equipment are included. Students are responsible for their own transportation, meals, and lodging.

**REGISTRATION FORM:** Basic Blood Cell Morphology Training Class

Name: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Message Phone: \_\_\_\_\_

**How to Register:** Complete the registration form and mail to the Department of Health, PHL Training Program, 1610 NE 150th Street \* PO Box 550501 \* Shoreline, WA 98155-9701 or FAX to: (206) 418-5445. A confirmation packet (containing your registration confirmation, payment instructions, and a map to the course location) will be mailed to you. Please do not send money with your registration form.

# HIV testing on Medicaid Patients

Additional diagnosis codes have been added that establish the medical necessity for HIV CPT codes 86701 – 86703. Refer to Medicaid Memo 08-86 at the following website:

<http://fortress.wa.gov/dshs/maa/download/Memos/Year2008.html>

## Calendar of Events

**PHL Training Classes:**  
(<http://www.doh.wa.gov/ehsphl/phl/training/train.htm>)

**Basic Blood Cell Morphology**

March 19                      Shoreline

**2009 ASCLS-WA Spring Meeting**

(<http://www.asclswa.org>)

April 16-18                      Spokane

**Northwest Medical Laboratory Symposium**

October 21 - 24                      Seattle

**16th Annual Clinical Laboratory Conference**

November                      Seattle

Contact information for the events listed above can be found on page 2. The Calendar of Events is a list of upcoming conferences, deadlines, and other dates of interest to the clinical laboratory community. If you have events that you would like to have included, please mail them to ELABORATIONS at the address on page 2. Information must be received at least one month before the scheduled event. The editor reserves the right to make final decisions on inclusion.

For persons with disabilities, this document is available upon request in other formats. To submit a request, please call 1-800-525-0127 (TTY/TDD 1-800-833-6388).



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