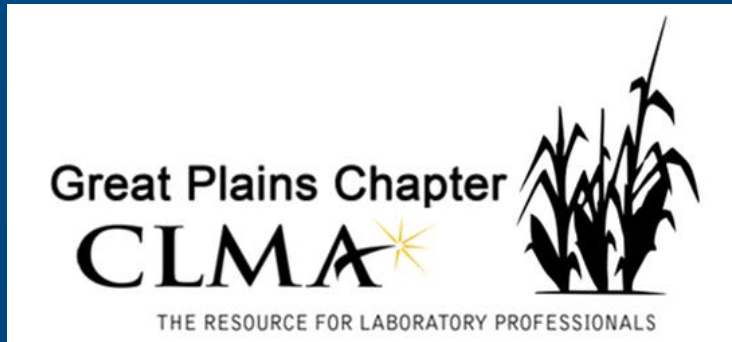


Microbiology- One Lab's Transformation from Ordinary to Extraordinary

Christy Saum, MT (ASCP)

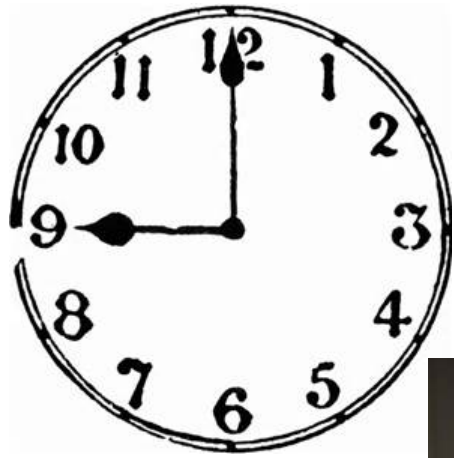
Laboratory Specialist-Microbiology

Bryan Medical Center

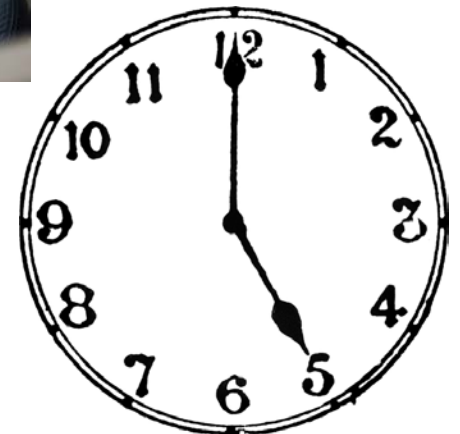
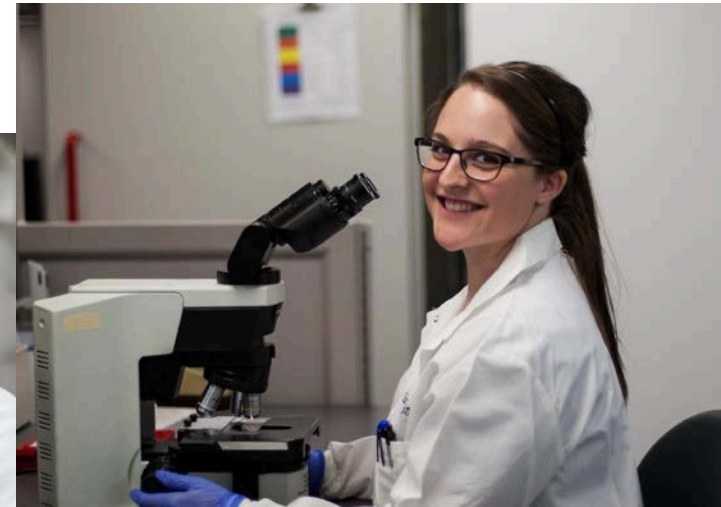


Bryan Medical Center-East



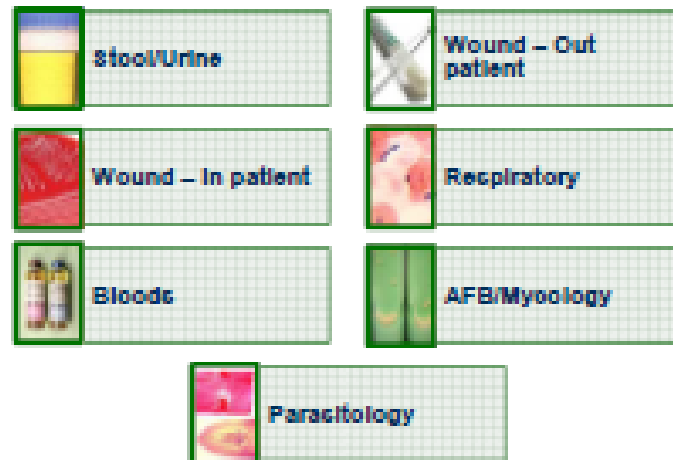


In the Beginning



In the Beginning

Current Assignments



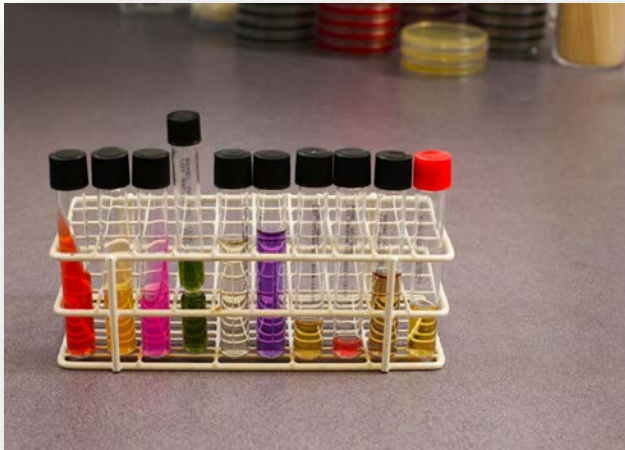
Current bench assignments create

- Silos which are not conducive to team work
- Assignments are not patient centric
- Unbalanced workload:
- The amount of effort on non-value added activities is limiting the potential of the department.
- Capacity, productivity and patient care are not optimized

In the Beginning



In the Beginning



Microscan for
ID and
Susceptibilities



Biochemicals



Rapid API strips for
Corynebacterium,
Anaerobic Gram
positive rods, and
Enterics

Unidentifiable organisms sent to a reference laboratory 2-5 days TAT

In the Beginning

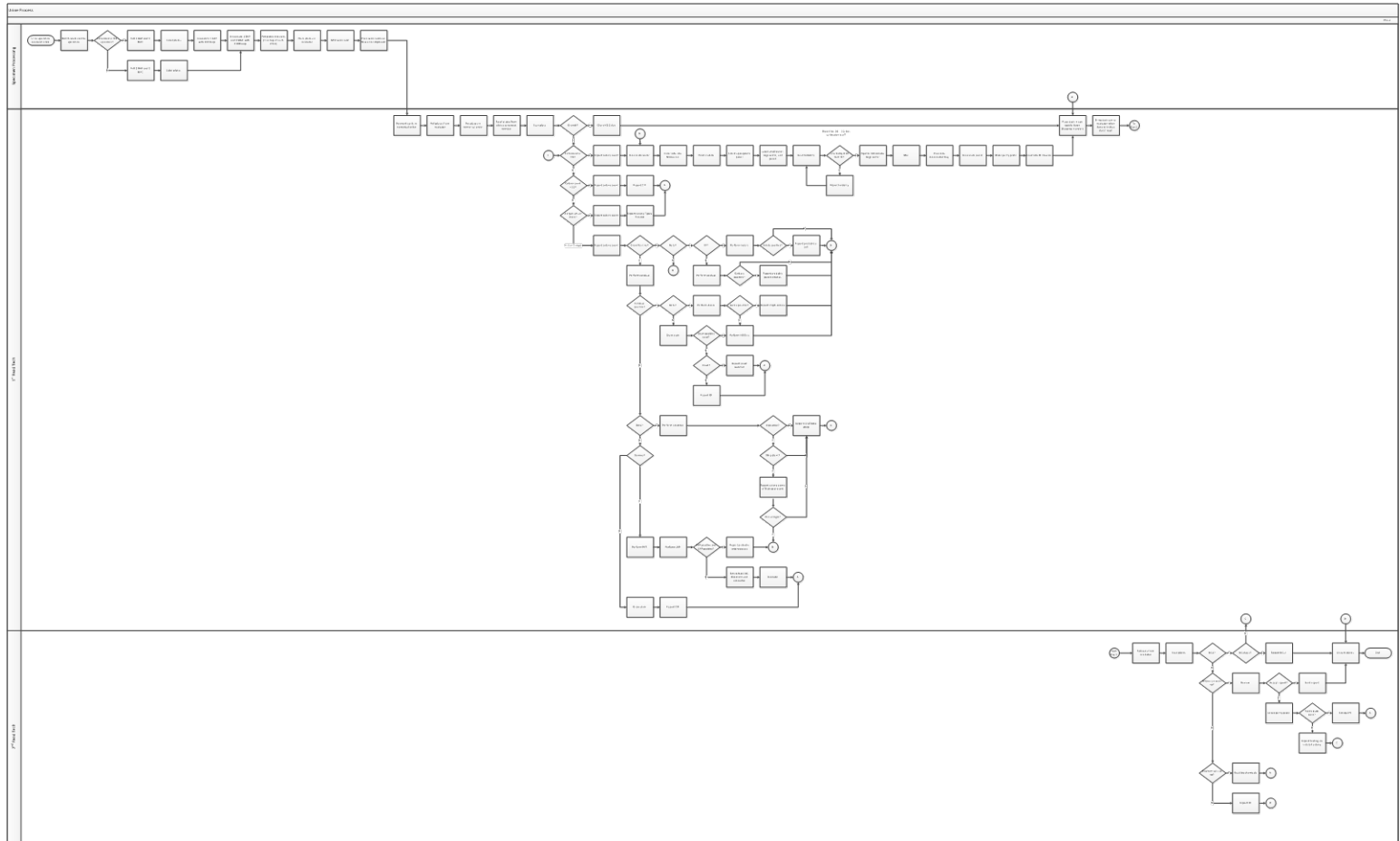
Specimen Flow



In the Beginning

- Held all urine cultures for 2 days
- Worked up everything in wound cultures
- Manually gram stained >100 slides per night
- Organism identifications in positive blood cultures weren't reported until the next day
- Some organisms took 7-10 days to identify with biochemicals.
- Lots of waste with Microscan consumables
- Non value added work-putting workcards and plates in numerical order

In the Beginning



In the Beginning



The Journey Begins



The Journey Begins

MALDI-TOF Mass Spectrometry

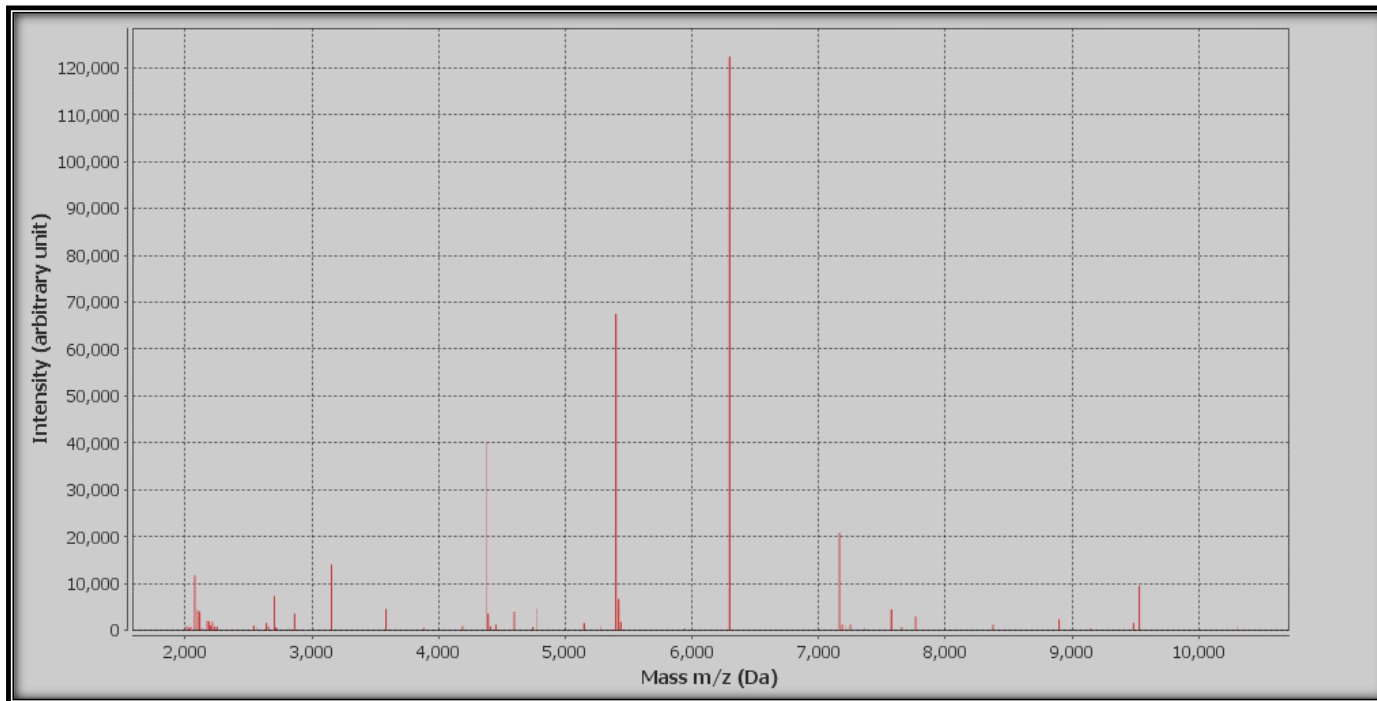
(Matrix Assisted Laser Desorption Ionization – Time Of Flight)

- Proteins in the organism become ionized by the laser
- The charged molecules are separated based on their mass-to-charge ratio
- A particle detector records the charged molecules as they reach an electrode surface in the time of flight vacuum.

The charge is usually a constant, therefore mass becomes the determining factor.

Heavier particles move at slower speeds, while lighter particles move at faster speeds.

The Journey Begins



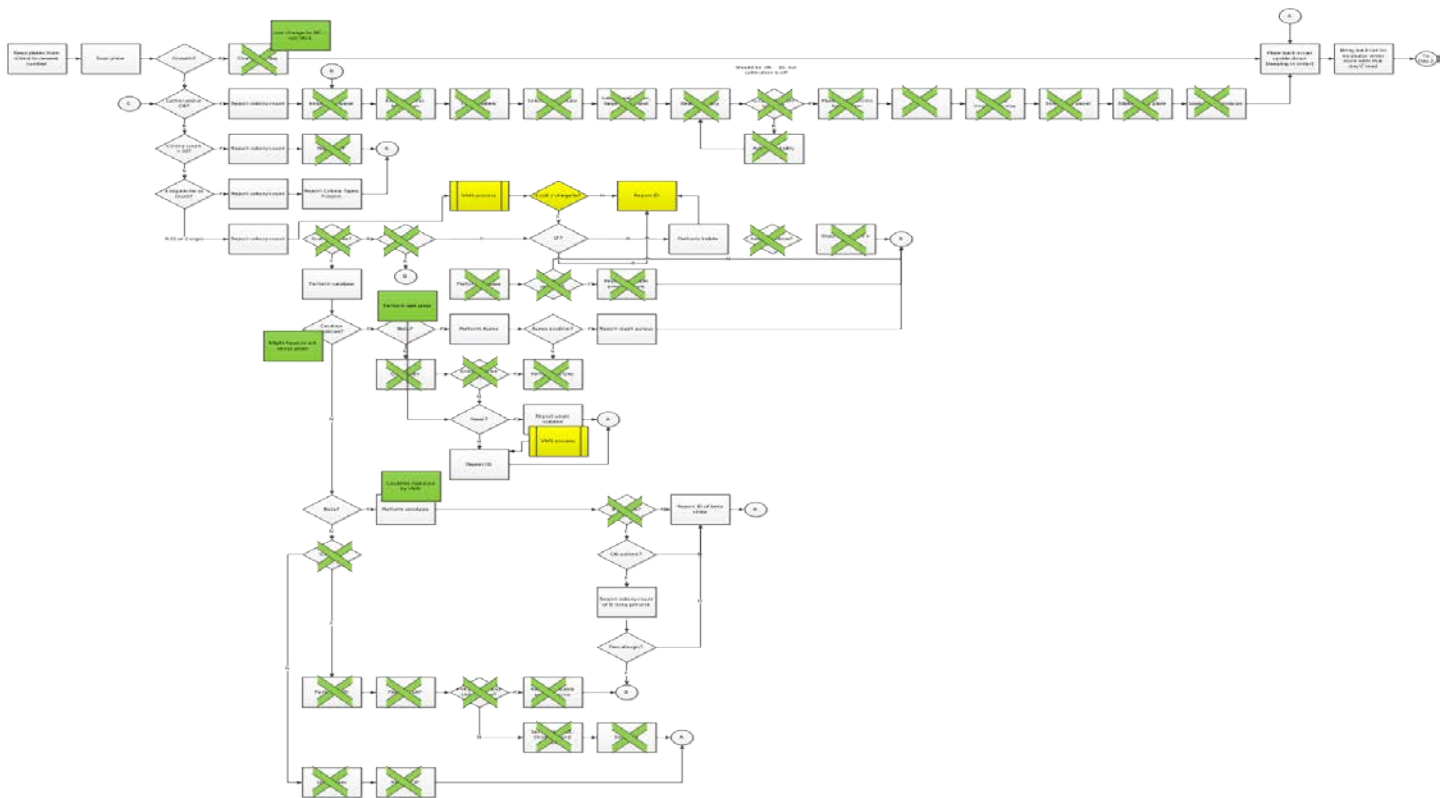
The Journey Begins

MALDI-TOF can identify organisms and yeasts in minutes

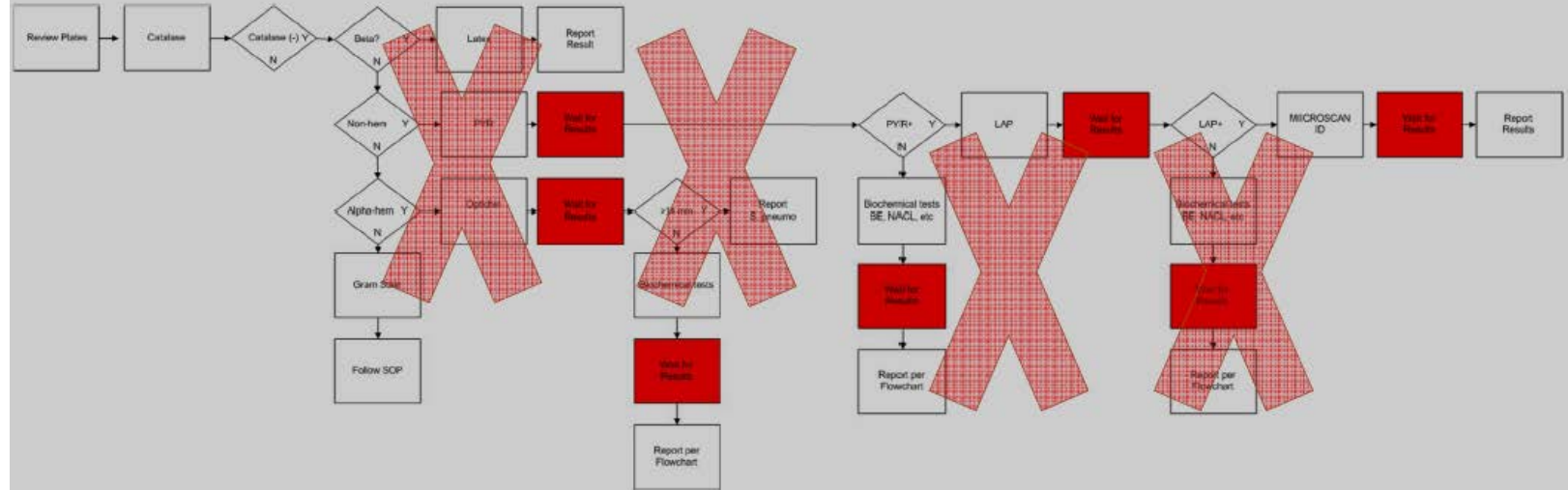
- After initial 18 hours of growth (required)
- A **very small amount** of specimen is placed on a designated spot on the slide
- The slide is then loaded into the Vitek MS (MALDI-TOF)
- The Vitek MS holds 4 slides
 - Each slide has 48 wells
- **Identification is available with in 2-5 minutes**



The Journey Begins

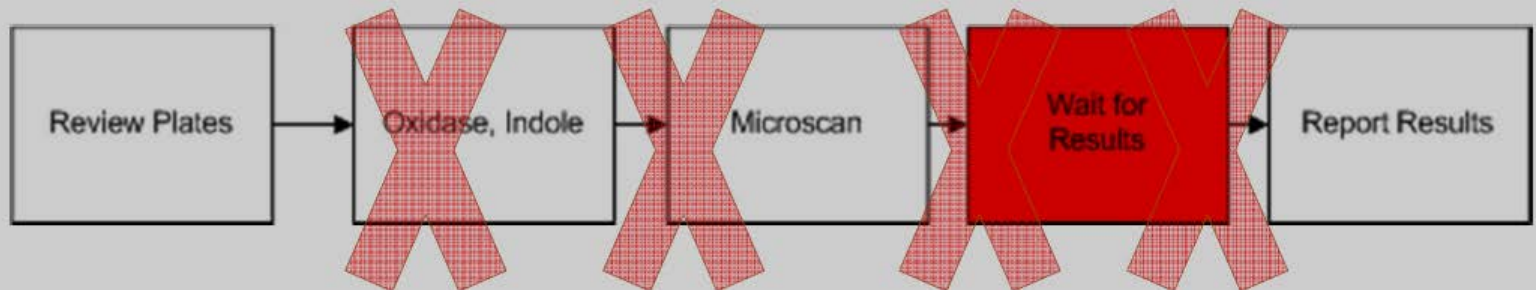


Strep Identification – BMC



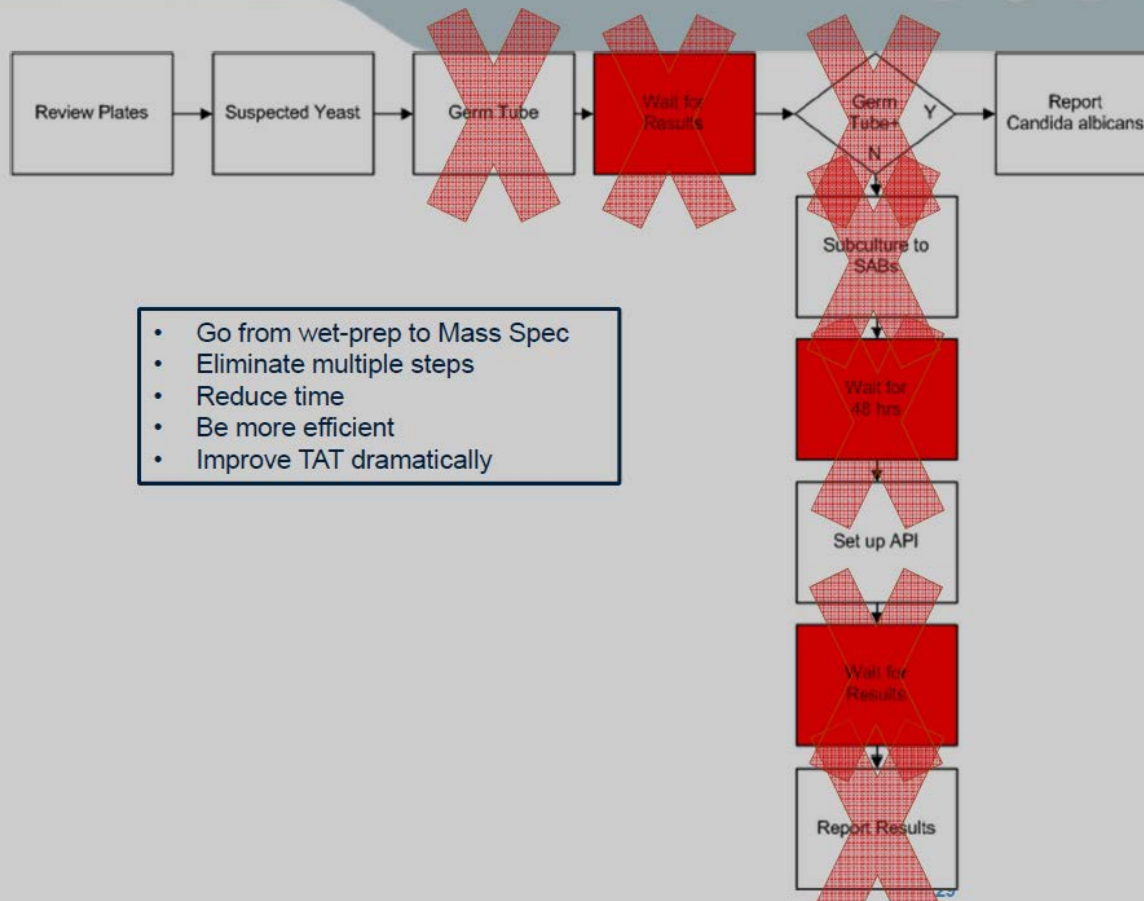
The Journey Begins

Aerobic GNR Identification – BMC



The Journey Begins

Yeast Identification



The Journey Begins

Making of the ROI

- Reduction of media on hand
 - OF media
 - RFA media
 - CTA media
 - Key tabs
 - Heart Infusion broths
 - Discs: PYR, LAP, Anaerobe discs (Bile, Kanamycin), X, XV, V, Butyrate, Novobiocin
 - Bile esculin, NACL, TSI, decarboxylase broths, esculin, nitrate, VP broth, germ tubes

The Journey Begins

Making of the ROI

- Reduction of identification methods
 - 5 Microscan panels
 - Microscan consumables (waters, inoculators, panels, covers, reagents)
 - Identification kits (API's)
 - Serotyping kit for beta Streptococcus
 - Send out testing on organisms we were unable to identify

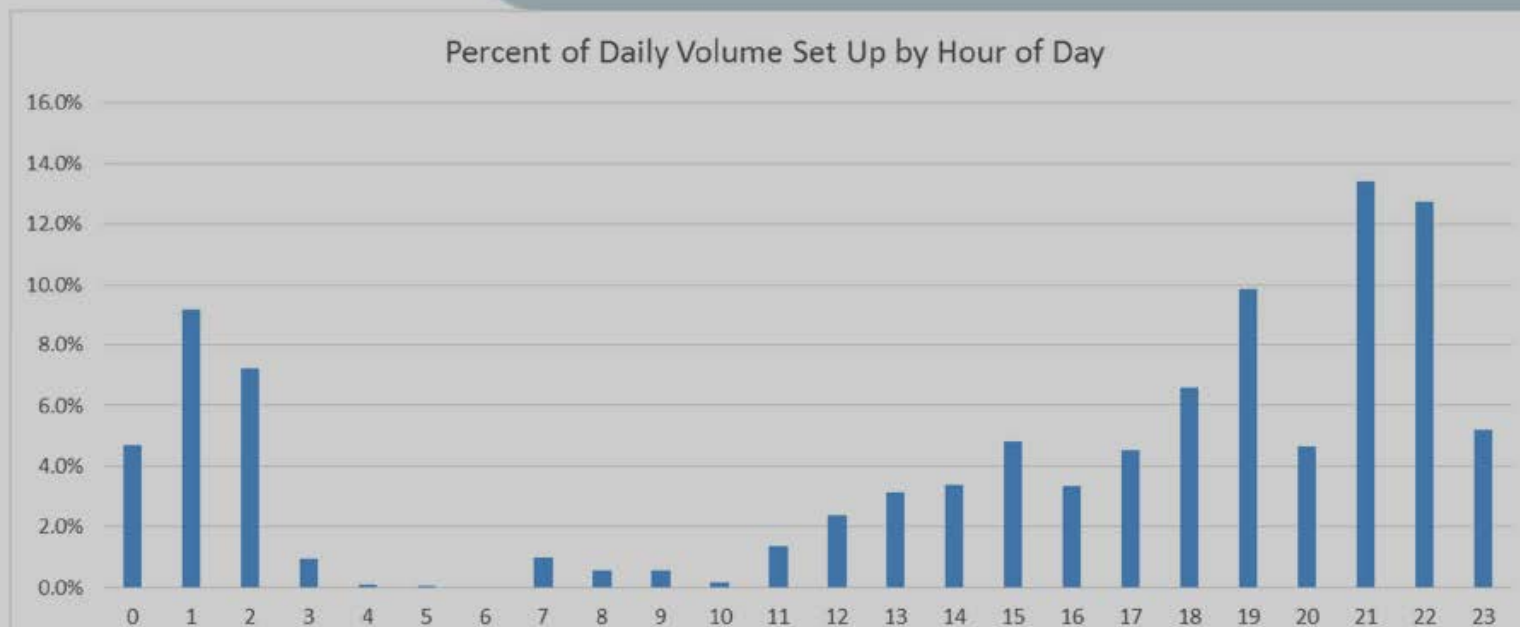
The Journey Begins

Making of the ROI

- Staff
 - Eliminate 10-18 hours of OT per two week pay period
 - New staff lack experience in identifying uncommon organisms which can lead to misidentifications, improper/inadequate antibiotic therapy, decreased positive patient outcomes
 - Physician satisfaction with improved TAT

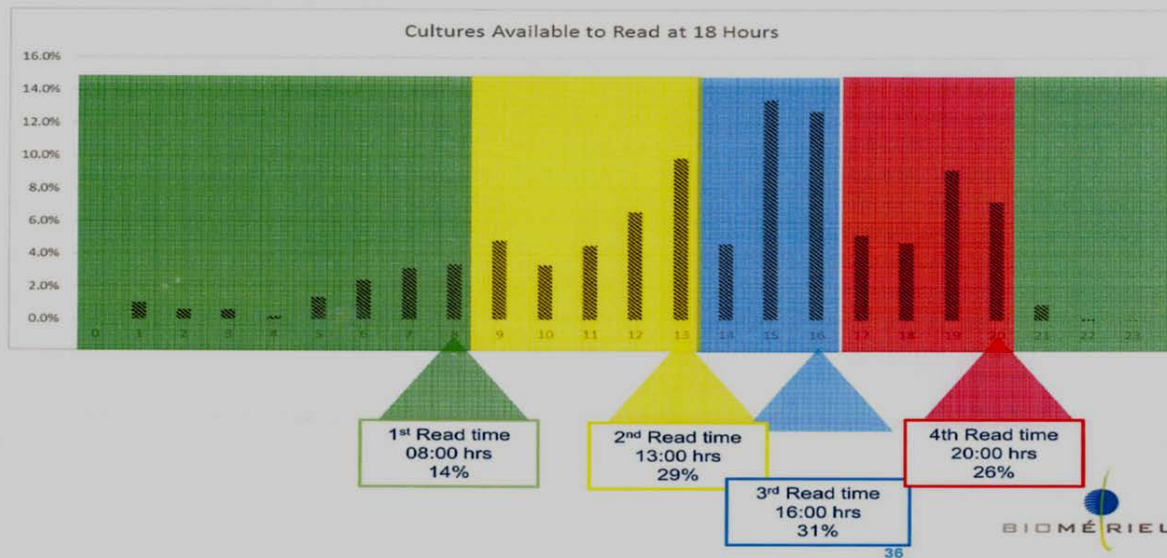
The Journey Begins

Receiving Pattern Trend



The Journey Begins

Reading at the Right Time



The Journey Begins

- Create 3 shifts of plate readers:
 - 0800-1700
 - 1300-2100
 - 2200-0600
- More support for the later hours when the majority of specimens are received
- Reading and reporting results 24/7 (first in/first out)

The Journey Begins

CULTURE LOADING & READING SCHEDULE

COLOR	INCUBATION TIME	READ TIME
GREEN	0:00- 3:59	21:00 (9p)
ORANGE	4:00 – 7:59	01:00 (1a)
YELLOW	8:00 – 11:59	05:00 (5a)
PINK	12:00- 15:59	09:00 (9a)
BLUE	16:00 – 19:59	13:00 (1p)
PURPLE	20:00 – 23:59	17:00 (5p)

- The "Incubation Time" is the actual time the plate is placed in the incubator



The Journey Begins

**No more
workcards!**

Scan the patient
information from
the plate!



The Journey Begins

- We average **107 urine cultures a day** and hold all plates for two days.

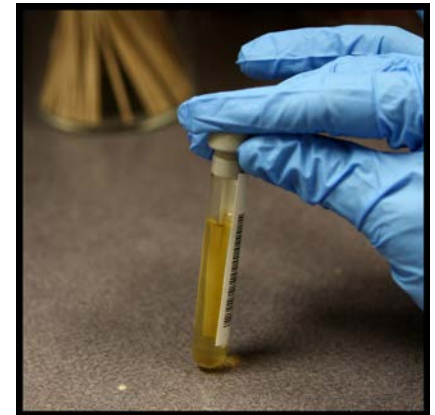
107 x 2 plates= 214 plates

214 plates x 2 days = 428 plates

428 plates / 16 per can = 26 cans of urines every day

- **2 Techs on day shift** → **1 Tech per shift**
Continuous reporting

- **Recommendation:** Final NG and contaminated specimens after 18 hours of growth, unless invasively collected (cath). Majority of organisms that appear on day two are contaminants - less touches saves time.



The Journey Begins

New wound culture reading process

1. Q score:

- Up to 3 organisms can be considered potential pathogens and be worked up (ID/AST) from a good quality specimen. (Q₃)
- The lower the quality of specimen the fewer the organisms worked up
- Q₀ provide only morphologic ID of organisms present – no work up

The Journey Begins

		SECs(-)				Q score
		0	-1	-2	-3	
PMNs	0	3	0	0	0	
	1	3	0	0	0	
	2	3	1	0	0	
	3	3	2	1	0	

0 = no cells
 1 = 1 - 9 cells/lpf
 2 = 10 - 24 cells/lpf
 3 = > 24 cells/lpf
 lpf = low power field
 PMNs = polymorphonuclear cells
 SECs = squamous epithelial cells

		SECs				PMNs
		0	-1	-2	-3	
0	3	0	0	0		
1	3	0	0	0		
2	3	1	0	0		
3	3	2	1	0		

0 = No Cells
 1 = 1-9 cells/lpf
 2 = 10-24 cells/lpf
 3 = >24 cells per lpf

The Journey Begins

New wound culture reading process (continued)

2. Q234:

Culture work up is based on number of potential pathogens present

- < 2 potential pathogens work up with ID/AST
- 3 potential pathogens look to direct Gram stain (work up to two if they are seen in the direct stain, if all 3 potential pathogens are seen in direct stain perform identifications only)
- 4 potential pathogens perform identifications only on isolates

The Journey Begins

Advantages of Q Systems:

- Consistent approach for interpreting cultures
- The systems are based on the quality of the specimen
- Work up is based on organisms seen in the direct Gram stain (*At least 10^5 organisms must be present to visualize them in the direct smear*)
- Limits the number of organisms worked up from mixed cultures-minimizing reporting of misleading information
- No potential pathogen is ever ignored
- Guidelines that can be modified to fit your institution

The Journey Begins

Q234 with modifications:

- Work up all organisms isolated from a sterile body site
- Non-sterile body site culture workup is based on potential pathogens present
 - < 2 = perform ID/MIC
 - 3 = refer to Gram stain for guidance
 - >4 = perform identifications only unless:
 - *S. aureus*- rule out MRSA
 - Enterococcus- rule out VRE
 - Always perform ID/MIC on *Pseudomonas*
 - Always identify beta streptococcus
 - Always identify *C. perfringens*
 - Always identify *P. acnes* and *Actinomyces* species
 - Anaerobes (identify if predominant organism or seen in Gram stain) if several report mixed anaerobes present

The Journey Begins

Along with the new wound reporting process:

- Implementation of COPAN eSwabs replacing 3 types of collection swabs with one eSwab
- New wound collection procedure for physicians and nurses collecting these types of specimens
 - Superficial wounds – anaerobic cultures not needed on all specimen sources (such as: boils, cysts, lacerations, cellulites)
 - To swab or not to swab
 - Cleansing the collection site



The Journey Begins



In the Beginning

Specimen Flow





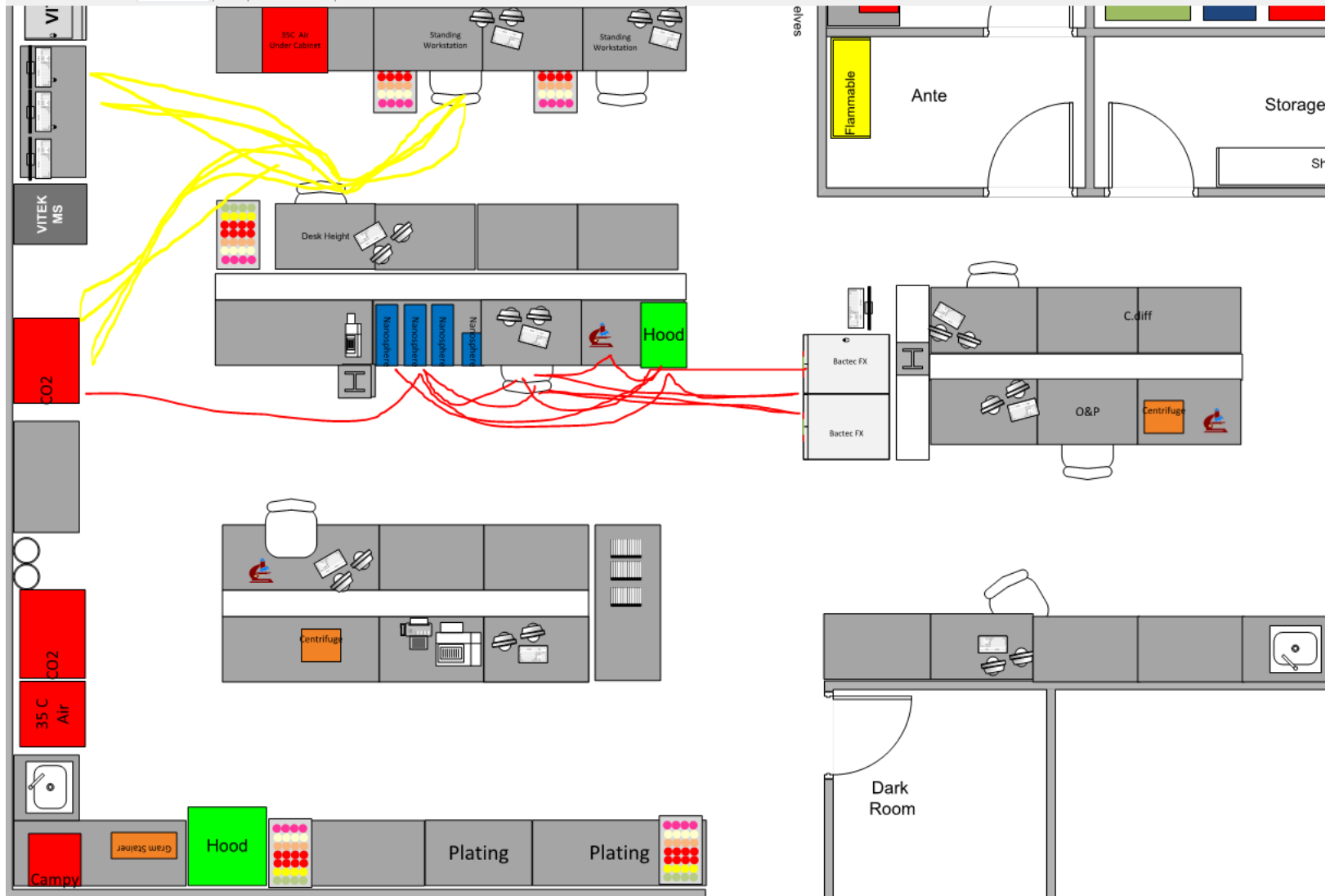
Total Renovation



Renovations:

- Moved 4 incubators to be closer to the set up area and culture reading benches.
- Took out a wall in the AFB room which accommodated space to bring in incubators, another sink for staining and the MGIT reader
- Moved the BACTEC FX and a countertop biosafety cabinet (hood) closer to the blood culture bench
- Installed the Vitek MS and Vitek 2 near the culture reading benches
- Added counter space to the set-up and specimen drop off area
- Dual monitor computers
- OL monitor- to monitor STAT testing

New Work Flow





Current Day

- Urine cultures with NG or contamination are reported at 18 hours – eliminates multiple touches
- Eliminated non value added work – putting workcards and plates in numerical order
- Elimination of Bunsen burners/ use disposable loops
- Standardized reading of wound cultures
- Multiple read times including o200 – smaller more manageable workload (first in first out) **every specimen matters**
- Vitek MS virtual prep station – able to set ID and MICS at the bench while reading cultures – no large batches
- Vitek MS identifications reported at 18 hours
- Renovation of laboratory – closer proximity to needed supplies and incubators

Current Day

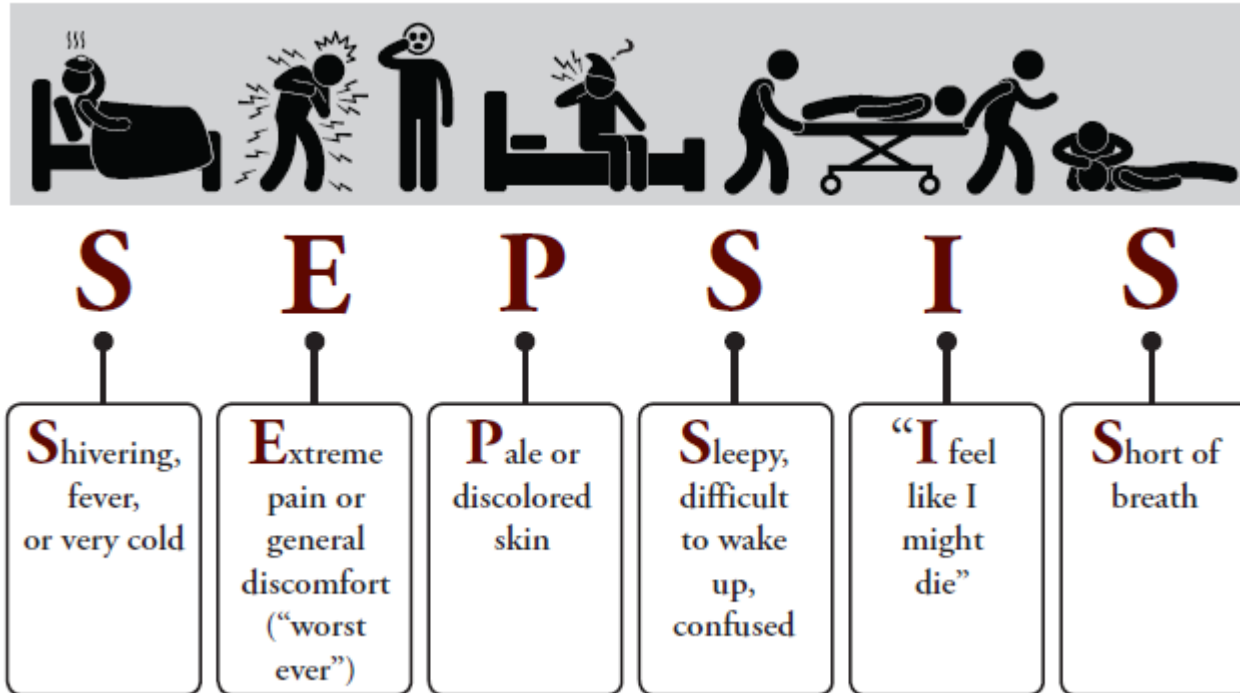


Before and After TAT Comparison

Baseline	Pos Urine Median	Pos Urine Q3	Neg Urine Median	Neg Urine Q3
Bryan Health	40	46	37	40
After Transformation Data: 2/19/16-3/7/16	41	46	19	25

Negative Turn Around Time decreased by 49% due to restructuring of culture reading processes.

New Equipment



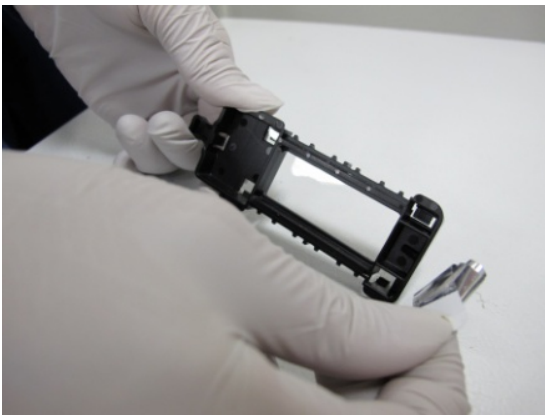
Each hour of delay to antibiotic administration has a 7.6% increase in mortality

New Equipment



New Equipment

Nanosphere Verigene MicroArray Methodology



New Equipment

Faster
identification
=
Earlier
treatment
with
appropriate
antibiotics

WOUND/BODY FLUIDS (985 isolates)

Antibiotic	Gram Positive (610)	+Enterococcus 18.5%	+Staph aureus 79.8%	Gram Negative (375)	-Enterobacter 11.7%	-E.coli 32.5%	-Klebsiella 12.3%	-Proteus mirabilis 7.2%	-Pseudomonas aerug 20.3%
PENICILLIN PO	88								
PENICILLIN G IV									
OXACILLIN IV	52								
AMPCILLIN IV	100								
AMPCILLIN/SULBACTAM IV									
PIPERACILLIN/TAZOBACTAM IV									
IMIPENEM IV									
MEROPENEM									
AZTREONAM IV									
CIPROFLOXACIN PO									
LEVOFLOXACIN									
CEFAZOLIN IV									
CEFUROXIME IV									
CEFOTAXIME									
CEFTRIAXONE IV									
CEFTAZIDIME IV									
CEFEPIME IV									
TOBRAMYCIN IV									

Numbers represent the % sensitive to the antibiotic

New Equipment

Multiplex Assay (Nanosphere Verigene)

- Directly add blood from the positive blood culture bottle to the sample well
- Both Gram negative and Gram positive identifications are done in 2 hours, also detects resistance factors (mecA, and van A and B)
- Consult the antibiogram
- Appropriate antibiotic therapy- de-escalation of initial broad spectrum antibiotics
- Better patient outcomes

New Equipment

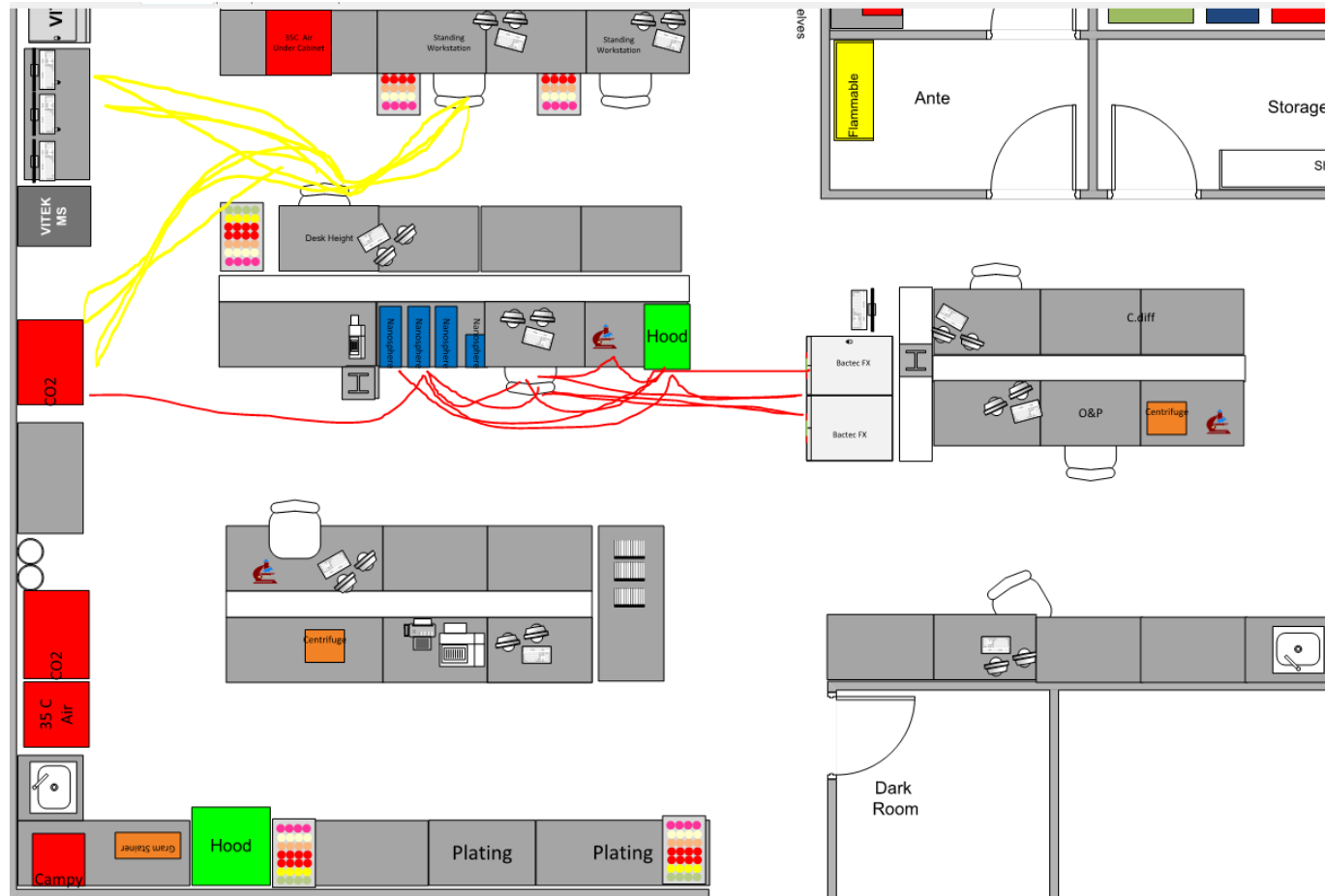


New Equipment

Automated Gram Stainer (MGS 8o):

- The MGS 8o incorporates a patented computerized “electronic eye” to perfectly time the decolorization of every sample regardless of the smear thickness, guaranteeing that all slides are processed correctly every time
- During validation on duplicate patient slides, bacteria was seen and noted on the automated MGS-8o slides and **not** on the original manual Gram stains. (Mostly anaerobes and other Gram negative rods)
- Able to continually add and process stains – no longer somebody standing at the sink or purple fingers
- Reading of stains was getting put off until the end of the shift

New Equipment



New Equipment



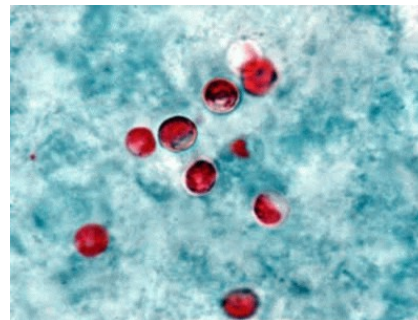
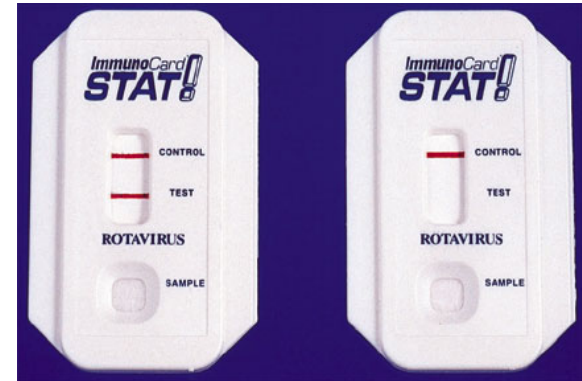
New Equipment- GI Panel

Case Study:

- 17 year old female student is seen in the ED. She complains of diarrhea, abdominal cramps, and gas for the last 3 days. She babysits her nephews and other neighborhood children on most weekends to earn some extra spending cash. She had sushi for lunch 2 days ago. Her roommate just returned from Cancun last weekend but she has no symptoms. Her dog Brutus has been throwing up the last 24 hours.

What tests should the doctor order??

New Equipment- GI Panel



The Current Process - Identification

- Culture results may take 3 days
- Ova and parasite concentrations and Trichrome stains are subjective.
- We would use multiple kits for other stool testing:
 - Giardia EIA
 - EHEC
 - Rotavirus
 - C. diff
 - Cryptosporidium by DFA
 - Modified AFB stain



New Equipment- GI Panel

The BioFire detects enteric pathogens in **1 hour**

✓ *Campylobacter*

✓ *Salmonella*

✓ *Plesiomonas*

✓ *Yersinia*

✓ *Vibrio*

✓ *Shiga-like toxin producing E. coli (E, coli O157:H7)*

✓ *Shigella*



New Equipment- GI Panel

The BioFire can identify parasites in **1 hour**

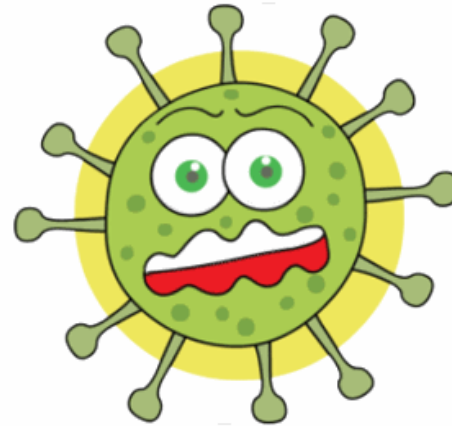
- ✓ *Cyclospora cayetanensis*
- ✓ *Entamoeba histolytica*
- ✓ *Giardia lamblia*
- ✓ *Cryptosporidium*



New Equipment- GI Panel

The BioFire can detect viruses in **1 hour**

- ✓ *Adenovirus*
- ✓ *Astrovirus*
- ✓ *Norovirus*
- ✓ *Rotavirus*
- ✓ *Sapovirus*



GI Panel Cost Effective?

PROS

- Eliminate 4 kits
- Remove subjective ova and parasite interpretations
- Results within an hour not 3 days for culture results
- One competency platform
- Would not have to send out Norovirus for testing

CONS

- Performed testing on 7,000 stool specimens last year.
- Many had only a few tests ordered [ova and parasite and Giardia] or [stool culture and shigatoxin assay]
- Kit costs \$4,650 we would need 233 kits **\$1,083,450**
- Is testing covered by insurance? Reimbursement?

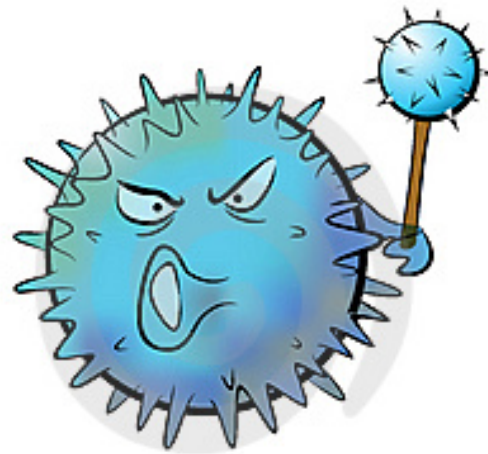
Not possible at this time

New Equipment Respiratory Pathogen Panel

Physicians want *faster* results on our smallest patients

Film Array (BioFire):

- **Respiratory pathogen panel:** *Influenza A, Influenza B, Adenovirus, RSV, Parainfluenza 1,2,3, and 4, Coronavirus, Enterovirus, Rhinovirus, Metapneumovirus, Bordetella, Chlamydophila pneumoniae, Mycoplasma pneumoniae*
- Results within 1 hour



New Equipment ME Panel

Physicians want *faster* results on our sickest patients

Film Array (BioFire):

- **Meningitis/Encephalitis Panel:** *E. coli, Hemophilus Influenza, Listeria monocytogenes, Neisseria meningitides, Streptococcus pneumoniae, Streptococcus Group B, CMV, Enterovirus, Herpes simplex 1 and 2, Human herpes virus 6, Parechovirus, Varicella zoster, Cryptococcus neoformans/gattii*
- Performed on CSF
- Results within 1 hour



Continue the Journey

Front end automation (WASP)



Photo © 2012 Copan Diagnostics, Inc. All rights reserved.

Happy Staff



Continue the Journey!

QUESTIONS???



Great Plains Chapter

CLMA 



THE RESOURCE FOR LABORATORY PROFESSIONALS