

MEMORANDUM

DATE: April 20, 2021

TO: Site clinical and administrative leadership

FROM: Dr Alexander (Sasha) Finn, Medical Director and Department Head, Laboratory Medicine
Catriona Gano, Director, Laboratory Medicine

RE: Critical Laboratory Staff Shortage

Despite active and ongoing recruitment of qualified Medical Lab Assistants and Medical Lab Technologists, the laboratory is experiencing a critical staffing shortage. The extent of the shortage may not be uniform across all facilities, but all facilities have some shortages. Maintaining adequate coverage during evening, overnight, and weekend shifts is proving to be particularly difficult. Thus, we are requesting the cooperation of our clinical colleagues in lessening the demands on the laboratory during these times.

If at all possible, please consider deferring requests for routine bloodwork to the next morning or next weekday and only request ESSENTIAL lab work and tests from the [STAT test list](#) (see below) between 1600-0530 Mon-Fri and at all hours on weekends.

Of note, many of the specimens collected after hours, including those for HgbA1c, electrophoresis, ANA, and specialized coagulation testing, are ultimately tested in our specialty areas or sent out to other laboratories such that the actual analysis is performed only during normal business hours (0800-1600 Mon-Fri).

We understand that there may be times when expedited bloodwork is required to provide acute care, improve patient flow, or facilitate patient discharge. Thus, we are suggesting the use of the following request options:

STAT	Used for critical care situations.
TIMED	Used when samples need to be collected at a specific time or at specific intervals, e.g., drug levels or cardiac markers.
SYSTEM UTILIZATION	Used when there is a critical need to improve patient flow. Given priority over routine work.
ROUTINE	Processed during the normal hours of laboratory operation. Most results available same day, save for those that are batched or referred to outside laboratories.

Please indicate the desired option on the requisition, and we will schedule the collection accordingly. This proposed system will better enable the laboratory to prioritize patients with urgent needs in our emergency and critical care units and to collect timed samples on the wards.

The lack of qualified applicants for multiple advertised laboratory staff positions across the island represents a local manifestation of a recognized provincial and national crisis. We greatly appreciate your support of the laboratory during this challenging time.

Signed by:



Dr Alexander Finn
Medical Director & Department Head



Catriona Gano
Director

Laboratory STAT Test List

Chemistry Blood Tests	Hematology Blood Tests
Electrolytes	Hematology profile and differential
Sodium	D Dimer – if pulmonary embolism presentation
Potassium	Fibrinogen
Chloride	PTT/PT INR
Carbon dioxide total	Malarial parasites
Toxicology tests	Microbiology Tests
Acetaminophen	Blood culture sample collection
Ethanol	CSF, sterile body fluids, vitreous/aqueous humour, peritoneal dialysate
Salicylate	Tissue touch slides prepared in the OR for Gram stain
Cardiac tests	Transfusion Medicine Tests
Troponin	Antibody screen
BNP/NT-proBNP	Blood group
ALT	Cross match
Bilirubin	Eligibility for Rh γ globulin
Blood gases (pH, pCO ₂ , pO ₂)	Body Fluid and Tissue Tests
Calcium/Calcium Ionized	Cell count and differential
Carboxyhemoglobin	Crystals
Creatinine	Fetal fibronectin/pIGFB 1
CK – for rhabdomyolysis only	Glucose
C Reactive Protein - for temporal arteritis and polymyalgia rheumatica only (FSR if CRP not available)	Protein
Digoxin - if indicated by ECG changes or clinical history	Routine urinalysis tests (Macroscopic, Microscopic)
Glucose	Anatomic Pathology – discussion with pathologist required
hCG (quantitative) – if ectopic presentation	Blopsy
Lactate	Cytology
Lipase	Intra-operative consult
Magnesium - if indicated by ECG changes	Lymphoma protocol
Osmolality (measured)	System Utilization – if prompt Medical Imaging service is required
Phosphorus	hCG (qualitative) as a pregnancy test
Uric acid	Creatinine as a marker of renal function
Other tests - only after the ordering physician has obtained the approval of a laboratory physician	