

## TCL to Change How Protimes are Reported

The Protime test is widely used as a screening procedure for clotting defects and monitoring patients receiving oral anticoagulation therapy. In an effort to offset the variation in Protime values between laboratories, the World Health Organization introduced the International Normalized Ratio (INR) in 1983<sup>2,3</sup>. Tri-Cities Laboratory currently reports both the Protime value in seconds and the INR. To ensure that patients throughout the Tri-Cities region receive standardized results for the Protime assay, Tri-Cities Laboratory will discontinue reporting Protime results in seconds.

Effective August 22<sup>st</sup>, the INR will become the default and only value reported for Protime orders.

## Tri-Cities Laboratory Welcomes Two New Medical Directors

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Drs. Dennis Hayden and Nashua Abed have assumed the role of medical director for two of TCL's laboratories. They replace Michael Cummings, who is moving out of the area. Dr. Cummings has provided medical direction to TCL since 2003, a time of significant growth in volume and services.

Dr. Hayden will serve as Medical Director of TCL Core Laboratories. Dr. Abed will serve as Medical Director of TCL at Kennewick General Hospital. Each will be responsible for quality and regulatory oversight of all departments including blood bank, microbiology, hematology and chemistry. They assumed their new positions on June 1st, 2009.

Drs. Hayden and Abed join our other medical directors:

Dr Richard Long, Medical Director of the TCL laboratory at Lourdes Medical Center and Dr. Brian Staley, Medical Director for Kadlec Regional Medical Center Laboratory.

## Estimated Average Glucose Calculation

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On August 22, Tri-Cities Laboratories will begin reporting the Estimated Average Glucose (eAG). The eAG is a better estimation of the glucose level in blood at a point in time and will replace the current Mean Blood Glucose value. The eAG is calculated from the Hemoglobin A1C level:

$$\text{eAG (estimated average glucose)} = (28.7 \times \text{HgbA1C}) - 46.7$$

## Vancomycin Therapeutic Range Change

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Based on recommendations outlined in the consensus statement of the American Society of Health-Systems Pharmacists, the Infectious Disease Society of American and the Society of Infectious Disease Pharmacists<sup>1</sup> TCL is changing the Therapeutic Range for vancomycin from the current range 5—15 mg/L to the recommended range of 15 –20 mg/L. This change will be effective on August 15<sup>th</sup>, 2009. The laboratory will continue to call Vancomycin levels over 20 mg/L.

1. Rybak, M., Loemaestro, B., Rotschauer, J.C., Moellering, R., Craig, W., Billeter, M., Dalovisio, J.R., Levine, D.P., *Therapeutic monitoring of vancomycin in adult patients: A consensus review of the the American Society of Health-Systems Pharmacists, the Infectious Disease Society of American and the Society of Infectious Disease Pharmacists*. Am J Health-Syst Pharm. 2009; 66:82-98
2. Clinical and Laboratory Standards Institute (CLSI). Procedures of the validation of INR and local calibration of INR systems; Approved Guideline. CLSI document H54-A. Clinical and Laboratory Standards Institute, 940 West Valley Rd., Suite 1400, Wayne Pennsylvania 19807.
3. Olson, J.D., Brandt, J.T., Chandler, W.L., Van Cott, E.M., Cunningham, M.T., Hayes, T.E., Kottke-Marchant, K.K., Makar, R.S., Uy, A.B., Wang, E.C. , 2007 Arch Pathol Lab Med; 1641-1647

DESCRIPTION	<b>Prottime; PT; Prothrombin Time</b>
METHOD	Optical Density Endpoint
ORDER CODE	<b>PT</b>
CPT CODE	85610
SPECIMEN	Liquid blue top (3,2% Sodium Citrate) tube filled to capacity.  Must be performed within 24 hours of collection. Specimens should be transported un-centrifuged or centrifuged with plasma remaining on top of the cells in an unopened tube kept at 2-4 °C or 22-24 °C.  Store and transport refrigerated.
UNACCEPTABLE CONDITIONS	Severely hemolyzed, clotted specimens or improperly filled liquid blue top tube or specimens older than 24 hours that
SCHEDULE	Daily
TURNAROUND	24 Hours
RANGES	<b>PT , INR</b>  0.9 - 1.2 Consistent with normal population  <b>PT, INR-Therapeutic</b>  2.0-3.5  2.0-3.0 Usual oral anticoagulation range.  2.5-3.0 High level oral anticoagulation range.
NOTE	If time interval between drawing and testing exceeds 24 hours, centrifuge specimen, separate plasma, re-centrifuge, separate into clean plastic tube and freeze at -20°C. Store and transport frozen.

**HAVE A QUESTION?**

**CALL TCL**

**CLIENT SERVICES . . . . . 509-736-0100**

**24 HOURS/DAY 7 DAYS A WEEK**

**EDITOR: Char Hall . . . . . 509-736-1234**