



# VOLUSION...ASCLS SD

Grassroots explosion of **VO**ICE, **VALU**E, **VI**SION

Official publication of the American Society for Clinical Laboratory Science ~ South Dakota

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All ASCLS SD members are invited to submit articles of interest to the co-editors for publication in future issues.



**ASCLS MEMBERSHIP RENEWAL TIME...  
A TIME TO CELEBRATE!  
RENEWING YOUR MEMBERSHIP...  
MAKES A PROFESSIONAL STATEMENT!**

## **Professional Is as Professional Does!**

By: Robert Jenson, ASCLS-SD 2nd Vice President 2010-11

We don't give ourselves enough credit. We are trained laboratory professionals. We literally have patients' lives in our hands each day. We directly influence a patient's treatment by the results we deliver to the healthcare provider. We help solve mysteries that cannot be solved by a history and physical or initial assessment. We have a passion for what we do and we put our heart and soul into it.

As a professional we strive to increase our knowledge. We strive to keep up on advances in testing modalities, reimbursement, government affairs, OSHA, accrediting agencies, CLIA, training of new laboratory professionals, and the list can go on and on. Why do we strive to do all this? To provide an accurate, precise and cost effective result to positively impact patient outcomes.

There are not enough hours in the day to keep up with all this. We all have strengths in some areas but not all. Through our continued membership in ASCLS we have the ability to play off everyone's strengths to make our profession stronger. ASCLS sends representatives from each state to Washington DC each year so that OUR voice is heard on Capitol Hill. Our voices were heard most recently with CMS rescinding the requirement of a physician's signature on all out-patient requisitions. Our voices were heard on the Competitive Bidding project a few years ago, which was also defeated. Our voices are heard each year at national, regional, and state meetings.

As a professional society we have a much larger voice together than we have individually. Let us continue to stand together, learn together, and have our voices heard as one. Let us gain from each other's strengths and together help shape the future of our profession.



## **ASCLS-SD Early Renewal Offer:**

Renew your ASCLS membership by July 31, 2011 and your name will be entered into a drawing for prizes!





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**President's Message: The Future Looks Bright!**

By: Deb Pravecek, ASCLS-SD President 2010-11

As I looked over the attendees at the annual meeting in Sioux Falls, I couldn't help but notice the large number of students in the crowd. That really gives me a lot of hope for the future of our profession. These are bright young people who are excited to be entering the field. As a former educator, I know how hard they have worked to reach their goals. Do you remember how excited you were when you first became a laboratory professional? I know I do....and as professionals we need to ensure that these "new professionals and our future shining professional stars" do not lose excitement for their chosen career. Every year I receive several requests from former students for letters of recommendation for acceptance into some professional school – usually medical school or physician's assistant school. These former students are very bright and will make wonderful physicians or PAs. However, it is painful for me to write the letters because I know the laboratory profession will be losing their brightest and best. I console myself with the thought that at least these new practitioners will have an understanding of laboratory testing and be able to properly interpret test results. Is there more we can do to make sure we retain our new professional laboratorians?



Many of these former students have stated to me that they are leaving the laboratory because they are "bored at the bench" and don't see any options available to them in the future. We need to do a better of job of mentoring young professionals and helping them develop long term goals and career plans. Mentoring is a fantastic way to help the new professional grow and build the confidence necessary to reach their goals. We should also encourage involvement in professional societies like ASCLS. Welcome new ASCLS members and invite them to become a part of our community. Those who feel like they are part of a community are less likely to leave the profession.

On a similar note I also know how hard our program directors in the state have worked to recruit and retain these quality students. Because the profession is not highly visible and the coursework required is demanding, it can be a challenge to attract students. But, the biggest obstacle is finding clinical sites for our students. We should be doing all we can to encourage our facilities to take students for their clinical experience. The benefits of training students outweigh the expense. Think of it as a way to recruit and train new employees for your laboratory. We owe it to our patients to ensure that there are qualified laboratory professionals available to take our place when we retire. I know that as I looked out at all of these new faces at the Sioux Falls meeting I thought.....perhaps there really will be laboratory professionals to do my lab work when I am elderly. The future looks bright – but only if we continue to encourage and mentor these young professionals.

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**Your Premiere  
Websites!  
Visit Them Often!**



**ASCLS-SD**  
[www.ascls-sd.org](http://www.ascls-sd.org)



**ASCLS Region V**  
[www.ascls-sd.org/id35.html](http://www.ascls-sd.org/id35.html)



**ASCLS Region V  
Fall Symposium**  
[www.ascls-sd.org/region-v-meeting](http://www.ascls-sd.org/region-v-meeting)



**ASCLS**  
[www.ascls.org](http://www.ascls.org)



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Salutes It's  
Premier Industry  
Sponsor!**



## **ASCLS-SD Annual Report of Activities**

By: Deb Pravecek, ASCLS-SD President 2010-11

As my term as your ASCLS-SD President comes to an end, I am pleased to share a summary of this year with our members. There were several meetings and opportunities for education.

- The 2010 ASCLS Annual Meeting was held in Anaheim, California in July. ASCLS-SD sent 5 delegates to this meeting. Katie Pieschke was elected as the National Student Forum Chair.
- The 2010 ASCLS-SD Region V Symposium was held in Rochester, MN in October. ASCLS-SD was also well represented at this meeting. The 2011 Region V Symposium will be in Fargo, ND. Bernie Reddy and Tami Svartos from ASCLS-SD are chairing the planning committee.
- The 2010 Fall ASCLS-SD/CLMA Collaborative Conference was held in Huron in November. Owen Bain chaired this conference. Planning is underway for the 2011 Fall meeting to be held in Mitchell. Pat Bezenek is chairing this event.
- The 2011 Legislative Symposium was held in Washington, DC in March. Three delegates from ASCLS-SD attended this meeting.
- The 2011 Spring Meeting was held in Sioux Falls in April. Becky Aman, Lezlee Koch, and Shirley Heber, Renee Rydell planned this event.

The ASCLS-SD Board established 2 task forces. The first was set up to look at how we can make our ASCLS more responsive to young professionals. The second one was established to look at licensure and how licensure would affect laboratories and laboratory professionals. Seven ASCLS-SD members volunteered to serve on this licensure task force. Two surveys were sent out – the first to all SD laboratories holding a CLIA certificate (except for labs with Certificate of Waiver only) and the second to ASCLS-SD members.

Surveys were sent to 210 laboratories. 141 completed surveys were returned. Laboratory facility survey results showed that

1. the level of education for laboratory personnel ranged from a high school diploma to an advanced degree (master's or PhD).
2. only 86/141 of the labs required certification of laboratory professionals as a condition of employment as a medical laboratory technician or medical laboratory scientist.
3. 42/141 of the responding labs required continuing education as a requirement of employment.

While the facilities survey was set up to determine the types of laboratories in the state and qualifications of personnel doing the laboratory testing, the membership survey was set up to determine our members feelings about licensure and personnel educational requirements. Some of the interesting results were:

- 71% of respondents felt that the Baccalaureate degree should be the minimum qualification for the MLS; 74% of respondents felt that the Associate degree should be the minimum qualification for the MLT.
- 96.5% of respondents agreed that laboratory professionals should be certified by a national certification agency. 91.7% of respondents held a current certification
- 53.0% of respondents either strongly supported or supported licensure. 24.6% were either strongly opposed or opposed to state licensure, while 22.4% were neutral on the issue.

If you would be interested in receiving the results of either survey, please e-mail me and I will be more than happy to send you the results.

Some other activities that we did this year included design and ordering of a new ASCLS-SD membership lapel pin – thanks to Michelle Friesen- and obtaining a new display board for recruitment efforts. Thanks to Sara Smith for her work on this project.

I would like to thank everyone who helped me make this year successful. We have a strong organization because of the willingness of our membership to serve.

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**Recruit A  
New  
Member!**

**Be An ASCLS Star!**

Every clinical laboratorian deserves the professional benefits of **ASCLS!**

- ★ Award winning publications
- ★ Members-only discounts for continuing education, resources, references and tools
- ★ Professional & Regulatory Advocacy
- ★ Grassroots benefits at the local, state, and regional levels
- ★ An instant professional family of thousands
- ★ Cutting edge resources and updates
- ★ Leadership development
- ★ Discounted services - credit cards, hotels, insurance programs and more

Share **ASCLS's VOICE, VALUE & VISION** with your professional friends and colleagues! We all benefit when ASCLS grows! The more members we have in South Dakota, the stronger our professional voice is here at home. Recruitment tips & tools can be found at:

<http://www.ascls.org>  
<http://www.ascls-sd.org/>

**Join or Renew Online at:**

<https://ascls.site-ym.com/?page=Join>



**Region V Director's Message: What's New in ASCLS? ASCLS is Definitely There for YOU!**

By: Deb Rodahl, ASCLS Region V Director

"Life is Change, Growth is Optional" was the title of my last newsletter article and this month takes another twist on this theme. There are many exciting changes going on in ASCLS! At the March 2011 ASCLS Interim Board meeting, Cathy Otto, ASCLS President-Elect moderated a planning day to discuss two important topics for ASCLS; Collaboration and Membership recruitment and retention.

The morning was spent exploring collaboration opportunities with CLMA (Clinical Laboratory Managers Association). Time was spent understanding the strengths of each organization as well as where risk might exist. This work will be the foundation for our discussions with CLMA representatives. We should have an update on these discussions at the ASCLS National Meeting in Atlanta. ASCLS Task Force members consist of:

- ★ Marcia Armstrong, ASCLS President
- ★ Scott Aikey, Chair of ASCLS Futures Task Force
- ★ JR Constance, ASCLS Board Member
- ★ Judy Davis,
- ★ Glenda Price

The afternoon was spent exploring how ASCLS is relevant for the various types of laboratory professionals and ASCLS members. We started off with a presentation on what does and does not typically work for membership recruitment with healthcare professionals. Healthcare professionals want to know the value of their membership and are less about fancy cover letters. Testimonials from current members and electronic connections are more meaningful than glitzy add campaigns. Personal (face to face) recruitment is more effective than other approaches.



Following the presentation we were split in groups to represent Students/New Professionals, Educators/Managers, Current Practitioners, and Retirees (nearing retirement). Each group explored the needs and motivators related to professional organization membership for their assigned category. This work was collected and will be utilized by the ASCLS Membership Committee for their ongoing work. In addition the Membership Recruitment and Membership Services committee will be merged under one umbrella this summer, retaining regional representation but will have more at-large members representing each membership category and with representatives from committees where a shared goal is to increase membership totals. ASCLS has budgeted \$13,000 for a recruitment/marketing campaign in the next fiscal year. If you have a strong interest in Membership Recruitment or Retention, please join the committee meeting at the national meeting this summer.

**More Changes – or ASCLS Office Updates:** The ASCLS Board of Directors has been working on a 5-year plan for when Elissa Passiment plans to retire. The challenge is that Elissa performs the function of at least 3 people in other organizations, which translated means that we have the "leanest" office of any out there. In today's world most professional organizations utilize a "professional organization management company" to provide the support needed. Therefore

## Mark Your Calendar ~ Upcoming Events

★★★★★★

### 2011 ASCLS Annual Meeting



July 26-30, 2011  
Atlanta GA

*"Southern hospitality meets best practice"*

#### Registration & Meeting Information

[https://ascls.site-ym.com/?page=Annual\\_Meeting](https://ascls.site-ym.com/?page=Annual_Meeting)

★★★★★★

### ASCLS Region V

FALL SYMPOSIUM



VOICE-VALUE-VISION

October 13-14, 2011  
 Fargo ND

[www.ascls-sd.org/region-v-meeting](http://www.ascls-sd.org/region-v-meeting)

★★★★★★



**2011 Fall Collaborative Conference**

November 3-4, 2011  
 Mitchell SD

[www.ascls-sd.org/id71.html](http://www.ascls-sd.org/id71.html)

★★★★★★

the ASCLS board entertained bids from Professional Association Management companies and made a decision to contract with Smith-Bucklin to provide Organization Management for ASCLS. This was implemented in January of this year with Elissa becoming an employee of Smith-Bucklin and Sherry Miner and Joan Polancic remaining as employees of ASCLS. The Smith-Bucklin management fees allow us to retain Elissa until she retires with additional office support as well as professional services support including marketing, finance, IT, etc. This was a budget neutral decision for ASCLS and helps move us into the future. There has been an amazing amount of work accomplished in the last few months including a transition to a new website look and functionality. Check it out! [www.ascls.org](http://www.ascls.org)



*It is truly an honor to represent Region V in ASCLS. I enjoy hearing from our members (or non-members). I can be reached at [drodahl@earthlink.net](mailto:drodahl@earthlink.net) (651)779.8906*

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## Legislative Days 2011 - Delegates Report

By: Michelle Friesen, Tanya Crockett, & Rachael Schilder - 2011 Legislative Days Delegates



Left to Right: Tanya Crockett, Michelle Friesen, Katie Pieschke, Rachael Schilder

The 2011 ASCLS/CLMA/ASCP/AMT Legislative Symposium was held March 21<sup>st</sup> and 22<sup>nd</sup> in Washington D.C. This year there were four legislative and regulatory issues for overview, update and assessment of impact on the laboratory.

#### ★ Personnel Shortage -Reauthorization of Workforce Investment Act

Clinical laboratories are facing a personnel shortage. Approximately 40% of the laboratory workforce is within ten years of retirement. The Bureau of Labor Statistics estimates that there will be almost 11,000 laboratory technologist/technician job openings annually through 2018. Unfortunately, the programs preparing tomorrow's laboratory workforce train only about 1/3 of what is needed. Fewer than 5,000 individuals are graduating each year from accredited training programs. The reauthorization of the Workforce Investment Act will provide the best possible way to secure jobs and stabilize the nation's clinical education and training programs, helping to fill vacancies in laboratory medicine. The contributions laboratory professionals make to patient care cannot be overstated. Laboratory professionals play a critical role in patient care.



**ASCLS-SD  
Proudly  
Recognizes  
It's New  
Members!**



**Nicole Renkly**  
Lake Benton

**Tanner Langum**  
Brookings

**Melissa  
Blackburn**  
Sioux Falls

**Brittany  
Monson**  
Clark

**Matthew Aas**  
Watertown

**Alexandra  
Mammenga**  
Rock Rapids

**Rebecca  
Polasek**  
Watertown



**"Wishing You A  
Wondrous &  
Professional  
Journey In  
ASCLS!"**

★ **Oversight and Regulation of Laboratory Developed Tests (LDTs) and Their Role in Genetic Testing and "Personalized Medicine"**

Laboratory Developed Tests (LDTs) play an important role in patient care and in the development of new innovative tests. They are created in response to a critical need to meet specific patient care and/or public health needs and many LDTs represent the most fertile area for medical advancement. LDTs are a value-added service to patient care. We asked that legislation include provisions for the input of the laboratory community to ensure the intended outcome of the legislation – quality, safe health care for our people.

★ **Modernizing the Clinical Diagnostic Laboratory Fee Schedule**

The Medicare program reimburses clinical diagnostic laboratory tests according to the fee schedule which has not been subject to a fundamental review since it was established in 1984. Significant technological advances in the delivery of clinical laboratory services in the last 25 years are not fully reflected in the current laboratory fee schedule. Unless the fee schedule is modernized, patient access to health care is at risk and shortages in qualified personnel are anticipated. We asked that legislators look at H.R. 1452 and allow a committee comprised of laboratory professionals, physicians, hospitals, independent laboratories, Medicare, private payers, etc. to negotiate revising the fee schedule to reflect increased cost and enhanced technology.

★ **CMS Physician Signature Requirement**

Thank you for your voices in convincing CMS to rescind the requirement of the physician signature on every hard copy of laboratory requisition. Requiring a physician signature on the requisition would have slowed down testing processes and delayed getting vital test results to our patients and their care givers. Within 48 hours, the signatures of 82 House of Representatives and 29 Senate members were collected to rescind the requirement of physician signature on laboratory requisitions.

It was great to have the experience to see representation from a majority of the 50 states attend the Legislative Symposium and lobby for our professional group!

-Submitted by Michelle Friesen & Tanya Crockett, ASCLS-SD Government Affairs Co-Chairs



The 2011 Legislative Symposium in Washington, D.C. offered a view into the politics behind our professional organization. As a student in my MLS internship year, I know that I have much to learn about my chosen career in the coming years, and this experience gave me a starting point. I discovered that there are many people in organizations such as ASCLS, ASCP, CLMA, and AMT who watch for any legislation or rules that could affect our jobs. They keep us informed and help us present a unified voice to congress when necessary.

The main focus of the Legislative Symposium was to learn about lobbying and the issues facing our profession today, and then to lobby our state's senators and representatives about these items. Professionals came from all over the country, including Alaska and Hawaii, to participate in this unique opportunity. Issues to discuss this year included regulation of laboratory developed tests, laboratory personnel shortage and the Workforce Investment Act, modernizing the fee schedule, and the CMS physician signature rule. We visited the offices of Senator Thune, Senator Johnson, and Representative Noem and spoke to their legislative aides. We learned to leave them with our "ask" – what we wanted them to do for us. Everyone we spoke to was very receptive to our issues and asked that we follow up with them on any future developments, especially concerning the CMS physician signature rule.

Lobbying is something that you usually only hear about in news stories and on movies, but it turns out it actually works. The CMS has stated that they will not be enforcing the physician signature rule, one of the issues that our professional organizations have been working to resolve. If we take full advantage of our ASCLS membership, we can all help impact our profession.

-Submitted by: Rachael Schilder, ASCLS-SD Student Delegate

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## 2011 ASCLS-SD Award Winners!



### Member-of-the-Year

**Lori Murray**

### New Professional-of-the-Yr

**Stephanie Eckstrom**

### Keys to the Future

**Katie Pieschke**

**Pat Bezenek**

**Tanya Crockett**

### Omicron Sigma - State

**Lezlee Koch**

**Shirley Heber**

**Kay Rasmussen**

**Rhani Reseullo**

**Robert Jenson**

**Debra Thomas**

**Owen Bain**

**Rebecca Aman**

### Omicron Sigma - Region V

**Deb Pravecek**

**Nichole Taylor**

**Michelle Friesen**

### Omicron Sigma - National

**Katie Pieschke**



**2011**

## Membership Awards

2 Years

**Pat Bezenek**

**Katie Pieschke**

**Heather Hall**

**Kelly Pesek**

**Melissa Saxlund**

**Traci Ausland**

## Microbiology Scientific Assembly: Fecal Transfusions

By: Patti Mitchell, ASCLS-SD 2010-11 Microbiology SA Chair

Did I get your attention? "Ick", "gross", "sick", are a few words that come to mind when this topic comes up. Fecal transfusions, also referred to as "fecal bacteriotherapy", "fecal transplants," or "human probiotic infusions", are actually taking place in the medical world today.

Typically patients considering a fecal transplant have been diagnosed with *Clostridium difficile* disease, have been treated with antibiotics, but continue to have recurrent diarrhetic episodes and are unable to rid themselves of this condition. They are desperate for a cure.

A gram positive, anaerobic, spore-forming rod, *Clostridium difficile* is an opportunistic pathogen and a frequent nosocomial agent. Most cases of *Clostridium difficile* infections (CDI) occur during or shortly after antimicrobial use. Broad-spectrum antibiotics can disrupt the normal gut flora by wiping out beneficial organisms, allowing *C. difficile* spores to survive and colonize the intestinal tract. *C. difficile* produces toxins that are responsible for the clinical manifestations of the disease, including diarrhea to severe, life-threatening colitis. Community-acquired CDI has been diagnosed even in the absence of traditional risk factors such as hospitalization or antimicrobial use.

Various options are available for the treatment of CDI. Antibiotic treatment for *Clostridium difficile* infections usually includes oral vancomycin and metronidazole. Antibiotics are not always effective in ridding the patient of CDI. Probiotics, in forms such as powders, capsules, yogurt and dairy drinks, are living or lyophilized organisms sometimes used to re-populate the intestinal tract with normal healthy flora.

Probiotics are generally considered safe, but should be used cautiously in critically ill or immunocompromised patients. Probiotics have shown mixed results in reducing the risk of CDI relapse and are not recommended as a single agent for treatment of active infection. Fecal transplants have been performed on patients when other CDI treatments have failed. The process involves replacing the patient's feces with someone else's, and in the process, reestablishing the normal intestinal flora desperately needed. This procedure is still investigational but has been shown to have a high success rate. In severe cases of CDI (fulminant colitis or toxic megacolon) a colectomy may be necessary.

To qualify for a fecal transplant the patient has usually had two or more documented episodes of recurrent symptomatic *C. difficile* diarrhea, despite antibiotic treatment.

The optimal fecal transplant donor is a healthy relative who resides in the same household as the patient. The donor is exposed to the same environmental conditions as the patient and probably has similar normal flora. Prior to the procedure, the donor is screened for a variety of infectious bacterial, viral, and parasitic agents.

Donor feces may be transferred into the colon of the infected patient with a colonoscope, an enema, or by a nasogastric tube. The patient is typically pretreated with vancomycin several days before the procedure. A fresh stool specimen is obtained from the donor prior to the transplantation. The specimen is homogenized with saline and filtered. For nasogastric transplantations, a nasogastric tube is routed to the patient's stomach. Approximately 30 ml of stool suspension is injected into the nasogastric tube. The tubing is then flushed with saline and removed. This is a relatively quick outpatient procedure, and the patient can continue with his normal daily activities immediately following the transfusion.

The overall incidence and severity of CDI has been increasing. Hypervirulent strains have demonstrated greater spore-forming capabilities, increased toxin production, and higher

**Adam Bertsch  
Kelcy Black  
Katie Harding  
Lori Hemish  
Kaila Hughes  
Sarah Leader  
Kelsey Mertes  
Hope Niemeyer  
Amanda Rasmussen**

**Jennie Riles  
Daniel Rislov  
Rachel Schuelke  
Colleen Smith  
Mitzi Trooien  
Kelly Wiley**

**5 Years**

**Mary Rohrbach  
MaryBeth Sik  
Michelle Barthel  
Angie Petrik  
Rachel Rydell  
Nevonne Stoker**

**10 Years**

**Debra Thomas**

**15 Years**

**Susan Lopez  
Kelly Thomas  
Donald Wahl**

**20 Years**

**Rebecca Davis  
Owen Bain  
Sharon Ailts  
Patrick McMahon  
Mary Smrcka  
Pam Swier**

**25 Years**

**Robert Jenson  
Ardith Petersen**



**2011 MLS  
Scholarships**

**Richard Kipena  
Rachel Schuelke**



failure rates with antibiotic therapy. If these trends continue, alternative methods of therapy may be needed to treat CDI. Fecal transfusions have shown promising outcomes and further research is warranted.

References:

1. Aas J, Gessert CE, Bakken JS. Recurrent *Clostridium difficile* Colitis: Case Series Involving 18 Patients Treated with Donor Stool Administered via a Nasogastric Tube. *Clin Infect Dis*. 2003;36:580-585.
2. Gessert,CE Newsroom- Essential Health seeing Success in Stool Transplantation for Recurrent *Clostridium difficile* Colitis. 8/30/2010  
Available from Internet: <http://www.essentia institute.org/newsroom.aspx?id=4>
3. Hardy,J. (Hardy Diagnostics) Probiotic Therapy for C. difficile?  
Available from Internet: <https://www.hardydiagnostics.com/articles/Clostridium-difficile-and-Probiotics-Use.pdf>
4. Péchiné S, Janoir C, and Collignon A. Variability of *Clostridium difficile* Surface Proteins and Specific Serum Antibody Response in Patients with *Clostridium difficile*-Associated Disease. *Journal of Clinical Microbiology*, October 2005, p. 5018-5025, Vol. 43, No. 10

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***Pondering thoughts of an ASCLS Member... What does professional membership in ASCLS & July 4th have in common?***

By: Lezlee Koch, ASCLS-SD 1st Vice President 2010-11

In the United States, **Independence Day**, commonly known as the **Fourth of July**, is a federal holiday commemorating the adoption of the Declaration of Independence on July 4, 1776, declaring independence from the Kingdom of Great Britain.



Independence Day is commonly associated with fireworks, parades, carnivals, fairs, picnics, political speeches and ceremonies, and many types of events to celebrate the glory of "independence" which is the pursuit of freedom from control or influence of another or others.

As a professional member in ASCLS, I am proud of what ASCLS stands for. ASCLS's "fights and pursuits" undertaken every day, week and year assures that my practice and my profession maintain an autonomy to assure the provision of quality, patient-focused and safe care for all that I serve without the control of others who are less knowledgeable of my science.

**ASCLS...**

- ★ ASCLS's Code of Ethics sets forth the principles and standards by which clinical laboratory professionals practice their profession.
  - ✚ Duty to the Patient
  - ✚ Duty to Colleagues and the Profession
  - ✚ Duty to Society
 For complete Code of Ethics visit: [www.ascls.org/about/ethics.asp](http://www.ascls.org/about/ethics.asp)
- ★ ASCLS provides dynamic leadership and vigorously promotes all aspects of clinical laboratory science practice, education and management to ensure excellent, accessible cost-effective laboratory services for the consumers of health care.
- ★ ASCLS Core Values:
  - ✚ Promoting the value of the profession to healthcare and the public;

## Regulatory/QM Scientific Assembly Update:

### ***That Dreaded Abbreviation - OSHA***

OSHA inspectors have visited facilities in our region. (shudder, gasp, shudder, gasp, shudder!)

One facility shared the types of questions that OSHA asked front line employees... are the employees in your facility ready to answer these if they walk in your door?



- ★ What personal protective equipment (PPE) are you required to use performing your job? How do you use them and where are they located?
- ★ Have you ever had a needle stick injury? What do you do if you are stuck by a needle?
- ★ How do you clean up a chemical or biohazardous material spill? Where is your spill containment supplies located?
- ★ Where is the closest eyewash station? How do you use it?
- ★ Where are your MSDS sheets located for the supplies that you use? How do you interpret the information on these?
- ★ Who would ask if you have a safety concern?
- ★ Does your facility have a safety committee? How can you submit concerns to this committee?

(continued)

- ✚ Uniting the profession to speak with one voice;
- ✚ Advocating on behalf of the profession;
- ✚ Promoting professional independence;
- ✚ Enhancing quality standards and patient safety;
- ✚ Ensuring workplace safety;
- ✚ Providing professional development opportunities;
- ✚ Promoting expanded roles and contributions of clinical laboratory professionals to the healthcare team;
- ✚ Increasing the diversity in the profession and expanding the voice and role of under-represented individuals and groups.

So as you celebrate the 4th of July... Independence Day... Celebrate & Be Proud of ASCLS, your membership in ASCLS, your profession, the value that you bring to healthcare and the service you provide to patients, physicians, other professionals and the public!

### ***Home of the Brave... Clinical Laboratory Professionals United in ASCLS***

Through the chaos of healthcare they brave this day  
How proud they stand and work in their unselfish way

Our ASCLS professionals bear what the public may not see  
They assure quality care for patients to live life to the fullest and free

Just imagine how medicine and promotion of wellness would be  
Without the clinical laboratory professional's courage - catastrophe

All the liberties and positive patient outcomes we have grown to know  
Would not exist, without their dedication and get-up and go

For ASCLS and its members, find a thankfulness within your mind  
They are willing to fight and pursue excellence of the bravest kind

Our greatest achievement is that we continue to fight for autonomy  
Please take time and salute the professionals who cause this to be

On this Independence Day, ASCLS professionals raise your flags to wave  
For in healthcare, our ASCLS members truly are 'home of the brave' !



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### ***ASCLS-SD Spring Symposium - A Great Success***

By: Rebecca Aman, Spring Symposium Chair

Despite inclement spring weather (more like winter – snow and ice!) and a last minute change of venue, the April 15th ASCLS-SD Spring Symposium was a great success. Record-breaking registration necessitated a last-minute move to a space which could accommodate the large, enthusiastic audience. Nearly 80 registrants, many of them students from MLT and MLS programs across the state, attended a number of excellent presentations on the Sanford Health campus.



**OSHA survey questions...  
continued!**

- ★ Do you feel the facility has enough patient lifts for staff to use?
- ★ What are you required to complete for safety training?
- ★ Does your facility have a 'fall committee' and does your facility track patient falls?
- ★ Are incident reports required? Where can your facility incident reports be found?
- ★ Does your facility have a first report of injury for staff? Where are these found?



**2011 Updated NACB  
Laboratory Medicine  
Practice Guideline  
Now Available!**

***"Guidelines and  
Recommendations for  
Laboratory Analysis in  
the Diagnosis and  
Management of  
Diabetes Mellitus"***

The ultimate goal of the committee updating the previous guideline was to have laboratories and clinicians utilizing the guidelines collaboratively to provide both results that are as accurate as possible and thereby enabling clinicians to manage patients better.

Speakers and topics for the symposium were:

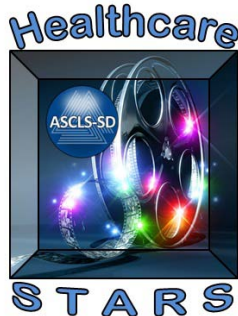
- Dr. Michelle Bleile – Peripheral Smear Review
- Nicole Matilla – First Trimester Aneuploidy Screening
- Deb Pravecek and Lezlee Koch – Professional Issues and Concerns
- Deb Pravecek – Blood Gases
- Milt Schonewill – Collection and Transport of Common Microbiology Specimens

Following a delicious lunch co-sponsored by Physician's Laboratory, the ASCLS-SD annual business meeting was held. The program included highlights of the past year, election of state officers for 2011-2012, and presentation of Membership Recognition awards, Keys to the Future, Student Forum, MLS scholarships, Omicron Sigma state, regional, and national, New Professional of the Year and Member of the Year.

Networking and idea-sharing were in evidence as attendees interacted between sessions. It was very exciting to have such a large number of students in attendance who are preparing for clinical laboratory science careers, and who are willing to learn from experienced laboratory professionals. ***If you were unable to attend this meeting, please consider attending a future symposium.*** Not only can you gain continuing education credits, you will also gain friendships and meet colleagues in your chosen career.



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***ASCLS-SD Spotlights:***

***Greg Suckow, ASCLS-SD Student Member  
Nicole Renkly, ASCLS-SD Professional Member  
Sheila Schneider, ASCLS-SD Professional Member***

ASCLS-SD proudly recognizes this issue's spotlight members who all are practicing clinical laboratory professionals with the Brookings Health System.



Left to Right: Sheila Schneider, Greg Suckow, Nicole Renkly

The broader goal is to reduce the terrible complications of diabetes and improve care.

Update highlights:

- ★ New diagnostic standard - HgbA1c
- ★ Reporting guidance
- ★ Redefining Gestational Diabetes
- ★ Pre-analytical Considerations
- ★ Latest on albuminuria - retirement of the term microalbuminuria
- ★ Tighter recommendations on accuracy of blood glucose meters
- ★ Real-time continuous glucose monitoring in adults with type I diabetes
- ★ Info on genetic and autoimmune markers - still require more evidence-based studies before being recognized for mainstream clinical use

To download a copy of this new practice guideline, visit:

[www.aacc.org/members/nacb/LMPG/OnlineGuide/PublishedGuidelines/diabetes\\_update/Document s/DiabetesEntireLMPG.pdf](http://www.aacc.org/members/nacb/LMPG/OnlineGuide/PublishedGuidelines/diabetes_update/Document s/DiabetesEntireLMPG.pdf)



**Greg Suckow MLT-** Greg is a new graduate of Lake Area Technical Institute, Watertown, SD, just recently finished his clinical rotation at Avera McKennan and is now an official 'practicing laboratory professional'. Prior to Greg pursuing his MLT, he was certified in the state of Alaska as an Emergency Trauma Tech, was a National Registry certified First Responder, and served as an Industrial Fire Fighter. Greg's hobbies and loves outside of the laboratory include hunting, fishing, and time with my wife and four year old daughter.

When asked why he chose to become an MLT and become an ASCLS member, Greg stated, "I chose a career in clinical laboratory because I have always been intrigued by science. After working in manufacturing, I decided it was time to get back into the medical field in a position that would challenge me. I now know that the laboratory will do just that! I joined ASCLS because I wanted to surround myself with like-minded professionals that have a passion for what they do. I also felt it was extremely important to be part of an organization that is working to inform others about the value of what we do." Greg finished by stating, "I do however have just one regret about the clinical laboratory profession. I regret waiting until almost 40 to become a laboratorian! I now have found my dream job and I know it will allow my passion to soar!"

**Nicole Renkly MLS-** Nicole completed her bachelor degree at USD, Vermillion SD, completed her clinical internship at Sanford Health, Sioux Falls SD and has now been at Brookings for 7 years. Nicole has taken on additional leader responsibilities, including section lead for Microbiology and Blood Bank and also serves as the Laboratory representative on the Emergency Services Team.

Nicole is one our newest ASCLS professional members. When asked why she decided to join ASCLS, she stated, "I know that professional networking and keeping up on changes affecting my profession is extremely important and felt that ASCLS could support me in those areas." Jokingly she also stated, "And Lezlee Koch was pretty darn persuasive...LOL"

During her years as a practicing professional, Nicole has come to realize the true value that laboratory services and professionals bring to health care. Nicole stated, "We need to be the clinical laboratory information specialists that provide high quality diagnostic and reliable information to all we serve. Our responsibility also includes serving as a vital link between patients and providers." In Nicole's spare time, she loves to spend time with family, reading, participating in outdoor activities and has a true love for distance running.

**Sheila Vondra Schneider MT-** Sheila graduated from SDSU, Brookings SD and interned at Avera St. Luke's, Aberdeen SD. She has been employed as a Medical Technologist at Brookings Health System for 19 years, is the current Hematology section lead, currently serves as the Laboratory representative on the Inpatient Services Committee and also previously selected to serve on the facility-wide Wage Analysis Committee.

In sharing her professional thoughts, Sheila said, "I chose to become a Clinical Laboratory professional because I was interested in medicine and science. As I reflect on my professional life I'm amazed at the changes in healthcare and continue to learn new things every day. I know in my heart that the laboratory is a 'front runner' in assuring patient quality and positive outcomes. All laboratorians are invaluable in patient care, even though many of us like to 'fly below the radar and do what we do best...provide quality clinical laboratory services and serve as a clinical laboratory science resource to physicians, patients, and other healthcare professionals'!"

When questioned about what the future will bring, Sheila shared, "We will need to work very hard at recruiting new professionals into our field to be able to replace the large numbers of clinical laboratory professionals that will be retiring in the next 3-5 year. We need to be supportive of clinical laboratory science education programs, provide student clinical training at our facilities, and be ready to share our knowledge and life's experiences with students and new professionals so they can be our profession's future shining healthcare stars!"

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