A Word from the President: Cathy Robinson, MSA, MT (ASCP)

Three hundred Phleb/MLT/MLS colleagues from MS and LA met in Alexandria for our Bi-State meeting, April 25-28. There were 36 scientific sessions, exhibit trucks from both Roche Diagnostics and Siemens, 27 vendor exhibits, student Quiz Bowl Tournaments, and plenty of fellowship and social time for everyone. Congratulations to our Meeting Committee for working energetically for the past 12 months to make this meeting a huge success.

With the rebirth of The Bayou Tech, our LSCLS society can again communicate with all our members and hospital and clinic laboratories. Thanks so much to Jessica Lasiter and Evan Ashley for taking over the Editorship reigns.

Our state wide campaign to contact all members and labs needs your help! LA is divided into 7 Areas with an Area Representative in each; when the AR contacts you to either assist in updating our rosters or asking for your updated contact information please respond and say “YES”.

One of our goals for 2012-2013 is to place a mentoree with each of our Board Positions. If you are interested in learning about LSCLS, what we do for our members, or considering running for a Board position in the future, contact your Area Representative, Stephanie Blackburn, or Cathy Robinson (Our contact information can be found on the LSCLS website by clicking on the leadership tab). Our society is only as strong as our membership.

The ASCLS Meeting is July 28 – August 3, 2013! Mark your calendars and plan to attend – the 2013 meeting is in Houston, TX!! Details, Preliminary Program, and Registration forms can be found at: www.ascls.org

- Cathy

Remember to check our website for updates, information, pictures, and resources: www.lscls.org

“Our society is only as strong as our membership.”

- Cathy Robinson

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- The HIPPA Omnibus Rule
- LSCLS/MS-ASCLS Awards
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- Tales From The Past
- ASCLS/LSCLS
The Health Insurance Portability and Accountability Act of 1996 (HIPAA) required Health and Human Services (HHS) to adopt national standards for e-healthcare transactions and national identifiers for providers, health plans, and employers.

A Covered Entity (CE) under HIPAA is any organization directly handling Protected Health Information (PHI)—e.g., hospitals, independent laboratories, insurance plans, physician offices. A Business Associate (BA) is a person or organization that performs a function or activity on behalf of a CE.

A quick way to determine if an entity is a Business Associate is to ask three questions:
- Are they performing a function for an organization or on their behalf?
- Are they a member of the workforce?
- Do they have access to PHI?

A Yes/No/Yes pattern = Business Associate.

The HIPAA Omnibus Rule was passed January 25, 2013, was effective March 26, 2013, and CEs and BAs have until September 26, 2013, to comply with the rule. The rule brings extensive modifications to the HIPAA privacy, security, and enforcement rules:
- Strengthens the limitations on the use and disclosure of PHI for marketing and fundraising
- Prohibits the sale of PHI without the individual’s authorization
- Expands an individuals’ rights to receive electronic copies of their health information
- Restricts disclosures to health plans concerning treatment for which a patient paid in full out-of-pocket
- Enhances enforcement rule, adding provisions addressing enforcement of noncompliance with HIPAA rules due to willful neglect
- Incorporates increased and tiered civil money penalty structure required by the HITECH Act
- Makes BAs and their subcontractors directly liable for compliance with certain privacy and security rules
- Requires specific language changes to organizations’ Notice of Privacy Practices

HIPAA requires patients with online access to their PHI to be credentialed. Organizations must provide access that both protects the patient’s identity and is also user friendly. Credentialing could also support bi-directional, secure email between patients and providers and is a Stage 2 EMR (Electronic Medical Record) Meaningful Use requirement. Credentialing extends to identity theft, obtaining medical services using another person’s insurance and falsifying claims for medical services.

The federal government is trying to determine how to best confirm patient identity seeking online access to their EMRs. This is critical because the EMR Stage 2 incentive program requires hospitals and doctors to provide patient online access to medical records. Congress has prohibited the creation of a national patient ID required under HIPAA citing privacy concerns. Guidance to healthcare providers on providing online EMR access to patients and protecting their identity is coming.

HIPAA compliance in 2013 calls for CEs to more closely monitor how BAs protect PHI security. Risk assessments should be stepped up by organizations. Office of Civil Rights audits and breach investigations indicate the biggest HIPAA compliance deficiency is lack of a current risk assessment. Any time there is an investigation for some type of breach or other HIPAA compliance issue by the government, a current Risk Assessment is one of the first things requested.

The Omnibus Rule provides CEs an opportunity to work with BAs to improve information security. Organizations should also be monitoring state privacy regulations since new privacy laws may be enacted at the state level. HIPAA compliance should be part of an organization’s culture and associate education has to be ongoing to ensure that.

—Cheryl Caskey, MT(ASCP)
Student Paper Awards

From left to right:
Jada Freeland, ULM - Toxoplasmosis: A Neglected Parasitic Infection
Tiffany Cummins Blackwell, ULM - Necrotizing Fasciitis: The Flesh-Eating Disease
Nikki Farrar, ULM - Tularemia

From left to right

Member of the Year – Laine Reeder, Rapides
Educator of the Year – Jessica Lasiter, ULM
Student of the Year – Johntavious Hampton, ULM
Student Bowl First Place—LSUHSC-Shreveport 1
From left to right
Thuy Vo
Deanna Breaux
Morgan Lafitte
Izzy Sumrall
Shree Pandey

Student Bowl Second Place—Rapides Regional Medical Center
From left to right
Amber McCabe
Buland Shrestha
Rakshya Sharma
Misti Camelin
Puja Shrestha
Brandon Morgan

40 Year Member Award:
Phyllis Toups
Omicron Sigma Regional, State, and National Winners: (From left to right)
Laine Reeder, Rapides Regional
Michele Werner, Bayou Pathology
Vanessa Johnson, LA Tech
Patsy Jarreau, LSUHSC
Angela Foley, LSUHSC
Meagan Fryday, Southern University
Jessica Lasiter, ULM
Cathy Robinson, ASCP
Not Shown: Kim Middleton, Dana Grant, Becky See, Joette Taylor, Stephanie Blackburn, Mary Muslow, Cheryl Caskey, and Norma Bivona

10 Year Member Awards:
Karen Williams
Cathy Robinson
Jennifer Bushnell
Sheryl Fowler
Danielle Richard
Bonnie Taylor
Mona Baker
Shannon Skena
Andrea Williams

20 Year Member Awards:
Patsy Page
Ronda Loreno

30 Year Member Awards:
Michael Cataldo
Rebecca See

Keys To The Future:
Joette Taylor
Laine Reeder

Industry Awards:
Omega Diagnostics
Roche Diagnostics

Presidential Awards:
Kim Middleton
Michele Werner
Dana Grant
The Student Forum of The Louisiana Society of Clinical Laboratory Science congratulates new student leaders!

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<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Program Home</th>
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<tbody>
<tr>
<td>Student Forum Chair</td>
<td>Gretchen Brocksmith</td>
<td>Our Lady of the Lake College</td>
</tr>
<tr>
<td>Student Forum Co-Chair</td>
<td>Bray Williams</td>
<td>Our Lady of the Lake College</td>
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<tr>
<td>Student Forum Secretary</td>
<td>Kristy Andrus</td>
<td>Fortis College</td>
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The LSCLS Student Forum coordinates the involvement of clinical laboratory students from across the state in the professional organization.

The LSCLS Student Forum introduced a number of successful ideas and events to the organization this year.

These enthusiastic and highly motivated, young professionals have extremely high hopes for the medical laboratory students of Louisiana this upcoming year.

In just the short year I served as Louisiana Student Forum Chair, I gained a great deal of knowledge and I will forever cherish this time as the most educational of my career. In closing my term as LSCLS SF Chair, I proudly accept the responsibilities of my new position as the First Year Professional. I plan to learn even more about the profession of Medical Laboratory Science and ASCLS. Personally, I plan to become especially involved with students and fellow new professionals.

If there are any students or new professionals interested in professional development, involvement, or simply being more informed as a laboratory professional, please feel free to contact me! I have attached my contact information below. I am looking forward to another great year for LSCLS!

Johntavious Hampton, MLS (ASCP)
LSCLS First Year Professional
hamptojd@gmail.com
318.953.1630
1988 seems like only a year or two ago, but so many things have changed in the laboratory since graduation 25 years ago. PPE such as lab coats and gloves have gone from if you want to...to you must. No more mouth pipetting, yes we were taught how to in school. The amount of blood bank, excuse me, Transfusion medicine antibodies that have been discovered. Who would have ever thought so many antigens could “live” on one tiny red cell. No more bunson burners for chemistry testing.

25 years of being a Medical Technologist, working 11pm – 7 am when I first graduated to my present job as a Clinical Compliance Coordinator of multiple labs, I would not change a thing. I knew in High School that I was meant to be a Medical Technologist and have never looked towards a different career choice.

Michele Werner, MT(ASCP), CLS-G
Medical University of South Carolina
class of 1988

This just recently happened in our laboratory (Green Clinic). About a year ago, Kat (her real name is Katherine), was working in Micro. Kat is a very quiet, petite individual. To say the least, her speech is of a quiet nature as well. Micro is in the very back of the laboratory with a loudly running refrigerator. So, if you have to say anything to the rest of the lab while in Micro, you must raise your voice to be heard.

One of our physicians had ordered a OCP and stool culutre on a patient. Instead of the patient coming to the lab to retrieve a stool collection kit, the patient decided to use something from home that was disposable. That disposable was a clean Cool Whip container. Totally acceptable but just wait for the rest of the story.....

After collection of the sample, the patient brought the sample to the laboratory in a paper bag. Without looking in the bag, the sample receptionist asked if the patient had written his name and DOB on the container. Good boy! He had done just that! So the sample was forwarded to Micro, still in the paper bag, for later processing.

A few hours passed and it was now time for Kat to begin processing stool samples for further testing. Kat announced that the rest of us were to "get ready" because she was about to begin opening the lids. You can imagine the stench from several stool samples being opened at once.

Kat opened the first sample and said. "Oh, my! It's Cool Whip." "What??", was the reply back from lab personnel. Once again (a little louder) Kat said, "It's Cool Whip." But this time she held up the sample and yes, there it was... The creamy, white stuff we all put on our Banana Pudding. The whole place burst into laughter.

Now, you do realize what this means? Yep, the stool sample was still in his refrigerator at home!

Since then, I can't pass by the Cool Whip section at the grocery store without laughing out loud and wondering if his wife scolded him for the "smelly" mix-up

---Tammy Singleton, MT (ASCP)
Green Clinic, Ruston Louisiana
I have been in the lab for many years and have seen many things, my most heart-wrenching stories involve families. Like many of us, I have seen many traumas that have ended in tragedy. A few years back, a young man was in an accident. His family was told that he had only survived with having most of his blood volume replaced. At that time, blood units were not tested for HIV or HepC. This young man had survived the horrible accident only to be diagnosed with HIV. He came into our facility on several occasions. I was pregnant with my first child when I first met “Jerry” and his family. His parents were so excited to have their baby boy still with them. Jerry was really sick, he had gotten a yeast infection and the medication had made him nauseous. He had called for a nurse, but they were not coming so I helped him sit up in the bed while his mother was out of the room. I got to know the family quite well. Over the course of 6 months, Jerry and his family shared their ups and downs. He would talk about things he had done and things he wished he could still do, like fishing and hunting. He was always in good spirits and his Mama was so sweet. They always asked about my family, despite knowing the outcome of their son’s disease. Jerry died a month before my son was born and I sent a card. His Mother saw the birth announcement in the paper and sent a congratulations card. I cried when I read it. She congratulated me on my baby boy and said she was glad that I cared about her family and her baby boy. It still amazes that despite all the troubles that the family had, they were concerned about me.

Judy Edwards, MT(ASCP)cm
Rapides Regional Medical Center
Alexandria, LA
What are ASCLS and LSCLS And What Do They Do For ME???

ASCLS stands for: American Society for Clinical Laboratory Science

- ASCLS is a national society for our CLS/MLS profession; it is staffed by and run by Clinical Laboratory Scientists.
- The home office is in Tysons Corner, Virginia; phone number: 571-748-3770; www.ascls.org
- The mission of ASCLS is to make a positive impact in health care through leadership that will assure excellence in the practice of laboratory medicine.

Core Values: Ensuring safe, accurate, efficient, appropriate and cost effective laboratory services is a component of quality
- Defining the characteristics of competent personnel within the profession and providing professional development opportunities so that practitioners can maintain competency are essential roles of a professional association
- Enabling laboratory professionals to function at their highest level of competence will contribute to cost effective health care
- Promoting diversity supports the delivery of quality laboratory service
- Taking a leadership role in standard and policy setting is a core professional responsibility
- Advocating for quality within the laboratory is essential to the assurance of quality health care delivery
- Additional information can be found at: www.ascls.org

ASCLS Believes:
- Quality laboratory service is essential to quality health care.
- Competent, credentialed, laboratory professionals are the foundation to quality laboratory medicine.
- Everyone deserves access to safe, effective, efficient, equitable, and patient-centered healthcare, and
- Advancing the laboratory profession advances health care.

LSCLS stands for Louisiana Society for Clinical Laboratory Science.

- All 50 states have a separate state society under the ASCLS; ours is the Louisiana Society for Clinical Laboratory Science.
- LSCLS represents all laboratorians, all laboratory-related degrees throughout our state. LSCLS mission, vision, and values are aligned with those of the ASCLS.
- Medical Laboratory Scientists are professional and valuable members on the health care team. We must speak up for ourselves to make our profession, our expertise, and our value known to the general public.
- LSCLS organizes a bi-state meeting every year with the Mississippi State Society (ASCLS-MS) alternating states every other year; These meetings offer:
  - Exceptional educational sessions for students, new professionals, and more experienced laboratorians to earn CEUs
  - Updates on political issues at state and national levels that affect our career
  - Opportunity to network and spend time with colleagues
  - Opportunity to meet vendors and get an ‘up close and personal’ view of new equipment and test methods/kits
  - Scholarship opportunities for earning higher degrees or working on research projects or attending meetings

Perspective from a Student

I recently attended the American Society for Clinical Laboratory Science of Louisiana and Mississippi 2013 Joint Annual Meeting, where I participated in various informative educational sessions. One session in particular, “The Road to Becoming a First Year Professional”, presented by Chantelle George, helped me tremendously in preparing for the transition from student to professional. During this session, I received valuable insight on how to create a well-organized and effective resume, as well as the skills needed to successfully handle an interview. Professional involvement and networking were strongly encouraged.

I was able to connect with Chantelle and she has been a great support in my transition. She assisted me with the revision of my resume’ and helped me with the licensure and certification process. She also has guided me in preparation for the certification exam by sending study materials. I have accepted a job offer and will successfully begin as a First Year Professional after my upcoming graduation. I plan to stay in contact with Chantelle as her invaluable insight and experience are supportive to my professional career development.

-Ta’Nyeka Ingram
LSUHSC New Orleans Student
The Mission of LSCLS is to:

- To encourage scientific research with open discussion of techniques—experimental, new, and accepted.
- To create better understanding and cooperation between the medical technologist and physician and all others who are employed in the interest of individual or public health.
- To establish a closer unity among the technologists of the state of Louisiana for individual, educational, and professional benefits.
- To encourage and promote the professional advancement of medical technology.

What do ASCLS and LSCLS do for YOU?

- Both professional organizations promote our profession to the public as well as to other health related professionals.
- Both organizations advocate for our profession and for maintaining the integrity of our qualifications.
- Both organizations offer continuing education to fulfill requirements for the Certification Maintenance of maintaining your certification.
- ASCLS sponsors a Legislative Symposium every March; representatives from all states attend this 3-day event to learn what legislation relevant to our careers is currently being reviewed in Washington D.C. and to visit our senators and representatives to discuss the importance of laboratory services to health care.
- LSCLS serves all laboratorians; we have 4,000+ licensed professionals in our state and only 245 of those are members of LSCLS.

Consider joining YOUR LSCLS state society and becoming involved; involvement can mean 15 minutes or more of our time depending on your commitment and interest. If we don’t support our own professional society, there are other professionals that are more than willing to do our jobs without our expertise! Exercise your right to join and become a member of ASCLS and LSCLS!

Cathy Robinson, MSA, MT (ASCP)
LSCLS President

Editor’s Note

I just wanted to say thanks to all of you who took time out of your schedules to help us bring back the Bayou Tech by providing us with the articles and the pictures. I also want to say thanks to Jessica Lasiter and Melanie Chapman for getting the articles together and providing editing advice. A very special thanks to Mallory McCarty who got numerous texts and emails making sure everything looked good every time I finished a section.

If anyone has any article that they would like to be put in the next edition of the Bayou Tech send the article to either lasiter@ulm.edu or evan.c.ashley@gmail.com. Also any suggestions of things you would like seen in the newsletter can also be sent to the previous email addresses.

Thanks,

Evan Ashley, MLS (ASCP)
St. Francis Medical Center, Monroe LA
Blood Bank