

**MEDICAL LABORATORY BOARD
MINUTES**

Date: July 10, 2008

Time: 9:00 am CDT

Location: Bureau of Health Licensure and Regulation
TN Department of Health
Heritage Place Iris Room
227 French Landing, Ground Floor
Nashville, TN 37243

Members Present: Norman Crowe, Chairman, Independent Lab Manager
Jere Ferguson, MD, Pathologist Vice-Chairman
Edward McDonald, MD Pathologist
John C. Neff, MD Pathologist, Educator
Yvonne Davis, Medical Technologist
Gloria Jenkins, Citizen Representative
Alison McDonald-Spakes, Cytotechnologist
Delores Voigt, MT Hospital Administrator
Darius Y. Wilson, MAT, Ed.D. Educator

Members Absent: Dennis Carter, MD Non-Pathologist Physician
Trudy Papuchis, MD Pathologist Hospital Administrator
Christopher H. Seay, Medical Technologist
Annie Washington, Medical Technologist

Staff Present: Lynda S. England, M.T., Director
Ernest Sykes, Jr., Advisory Attorney
Onezean Otey, Jr., Medical Technologist Consultant/Surveyor,
Middle Tennessee Regional Office
Mary Hamblen, Medical Technologist Consultant/Surveyor
West Tennessee Regional Office
Karon Hathcoat, Medical Technologist Consultant/ Surveyor,
West Tennessee Regional Office
Julia Daniels, Medical Technologist Consultant/ Surveyor
East Tennessee Regional Office
Taylor Carpenter, Medical Technologist Consultant/Surveyor
East Tennessee Regional Office

Staff Absent: All staff members were present for this meeting.

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CLIA Representative:

Quorum: A sufficient number of board members were present to constitute a quorum.

Called to Order: The meeting was called to order at 9:30 am CDT.

Note: Chairman Wilson reconvened the Personnel & Education Committee from 9:00 am until 9:28 am to complete unfinished business from the previous day.

Presiding Officer: The meeting agenda was conducted by Mr. Norman Crowe. Board members introduced themselves to the audience.

Conflict of Interest Policy:

Board members were reminded by Mr. Sykes to consider recusing themselves from any discussion of vote pertaining to meeting business if the subject material might have any relation to member business or any decision that might appear to be a conflict of interest.

Board Minutes:

A motion to approve the April 09, 2008 Personnel & Education Committee minutes was made by Dr. Neff.
Second: Dr. McDonald.
The minutes were approved.

A motion to approve the minutes from the April 10, 2007 meeting of the Board was made by Dr. Ferguson.
Second: Dr. McDonald.
The minutes were approved.

Board Report

Personnel & Education Committee:

Ms. Wilson presented a report of the actions of the Board's Personnel & Education Committee meeting, held on July 09, 2008.

Chairman Wilson asked Mr. Sykes to speak to those members of the board that are not part of the personnel and education committee concerning the revision of one board policy and establishing a second policy.

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Mr. Sykes discussed the highlights of a presentation made to the Board's Personnel & Education Committee members the previous afternoon. The presentation was made by Deputy Attorney General Alison Cleaves.

The subject material concerned the administrative actions for those individuals who continue to practice their profession after allowing their license to expire. (lapsed license).

Item 1: Lapsed License Policy
Rule 1200-6-1-.09

The policy the Board adopted in 2003, allowed the individual a "grace period" of three (3) months in which to cure that license status (expired) within ninety (90) days.

That policy will remain in place, however if an individual fails within that ninety (90) days period to bring his/her license into current status, this "lapsed license status" becomes disciplinary in nature. The civil penalty of one-hundred dollars (\$100.00) per month working on a lapsed license would be assessed by the Department. The holder of a license in lapsed status would be sent an agreed citation with an explanation of due process. This action would be considered a formal disciplinary measure to be included in the Departmental monthly disciplinary report, the individuals licensure file, and practitioner profile.

Mr. Sykes will draft a policy to be presented for approval during the October meeting.

Item 2: Continuing Education Policy
Rule 1200-6-1-.12

Mr. Sykes continued the presentation concerning the boards adoption of a policy for those individuals that find themselves in non-compliance with the continuing education requirements for licensed medical laboratory personnel.

These individuals are those that are part of the continuing education audit process and not those individuals seeking to upgrade their license to a different category status.

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The board's administrative staff is notified of a continuing education audit infraction by the Department's audit division.

The policy would give those individuals that do not have the required continuing education hours a ninety (90) day "grace period" in order to complete the requirements. The licensee would be notified via certified mail the number of hours required to correct the deficiency.

Should licensee fail to complete the required hours within the ninety (90) day period, a complaint would be filed against the licensee for violation of the above stated rule.

The complaint will then be reviewed by the board's consultant and advisory attorney for possible legal action.

No civil penalty would be assessed during this "cure" period.

The audit process for the past eight (8) months has produced so few individuals that are in non-compliance with the continuing education requirements, the board (committee) did not adopt an *automatic* monetary civil penalty measure. The board (committee) chose to take those individuals found in violation of the CE requirements on a case by case basis.

No vote was taken at this time. The two (2) policies will be presented for review during the October meeting.

Motion to accept the actions of the Committee: Dr. Neff.
Second: Ms. McDonald-Spakes.
The report was approved.

Contested Cases: There were no contested cases presented during this meeting.

Consent Orders: There were no consent orders presented during this meeting.

Board Report-Tennessee Professional Peer Assistance Program (TNPAP):

Mike Harkreeder, MA, RN
TNPAP State Director

Mr. Harkreeder reported statistics for the period July 1, 2007 to June 03, 2008 stating nine (9) individuals signed monitoring agreements with eight (8) of those individuals being referred from entities other than the Department.

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Seven (7) individuals were discharged from this program with two (2) individuals successfully completing the TNPAP program. Three (3) individuals refused monitoring services (reported to TDOH), and one (1) individual TNPAP considered monitoring unnecessary. One (1) individual was noncompliant with monitoring and was reported to TDOH.

The referral sources indicated seven (7) individuals were referred to TNPAP from board credentials. One (1) individual was referred by their employer.

The history of referrals TNPAP indicates six (6) individuals had a history of arrest (drug related arrest/illegal drug use/DUI). One (1) individual was referred for impairment in the workplace and one (1) was referred to TNPAP by the employer.

Motion to accept this report: Ms. Davis.

Second: Ms. Voigt.

Report Approved.

A copy of the TNPAP report is on file in the administrative office.

Note: Review of TNPAP materials via internet will count as clock hours toward continuing education credits.

A certificate of completion documenting review of these materials can be completed at the end of the internet session. Internet site: www.TNPAP.org

Board Report-Rules:

Ernest Sykes, Jr., Board Attorney

Mr. Sykes reported no rules were presented for adoption during this meeting.

Ratifications:

The following items were presented to the Board for ratification per staff, state surveyor or facility request:

- 1) Exemptions for point of care testing procedures (POCT) in a licensed facility (See Attachment 1).
- 2) Initial licenses for Clinical Laboratory Facilities (See Attachment 2).

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Board Director's Report/Discussion:

Lynda S. England BS MT (ASCP)
Director

Ms. England gave the report which included administrative office activities performed during the past quarter.

Motion: Ms. Voigt.
Second: Dr. Ferguson.
Report: Approved.

The director's report is on file in the administrative office.

**Direct More Than Three (3) Labs
Rule 1200-6-3-.13(5) Medical Lab Facilities:**

No requests were presented to the Board for review during this meeting.

Reinstatement of License:

No requests for the reinstatement of a facility license was presented for review during this meeting.

Reports/Discussion:

Reports:

Proficiency Testing (PT) & Complaint Investigations
Licensed Laboratory Facilities:

East Tennessee Regional Office: Julia Daniels, Consultant II/Surveyor

Unsatisfactory/ Unsuccessful Proficiency Testing:

The East Tennessee Regional Office reported two (2) unsuccessful performance for T3 and susceptibility testing and are awaiting plans of correction from the facilities.

Letters have been mailed to each facility with statements of deficiencies requesting corrective actions. The response to these incidents was pending surveyor review. No patient results were affected by these PT events.

Complaint Investigations:

The East Tennessee Regional Office conducted zero (0) investigation(s) during the last quarter.

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**Middle Tennessee Regional Office: Onezean Otey, Jr.
Consultant I/Surveyor**

Unsatisfactory/Unsuccessful Proficiency Testing:

The number of licensed laboratories demonstrating a first occurrence of unsuccessful proficiency testing events (two of three events) was three (3).

Complaint Investigation:

The Middle Tennessee Regional Office conducted zero (0) complaint investigation(s) during this quarter.

West Tennessee Regional Office: Mary Hamblen/Consultant II/Surveyor

Unsatisfactory /Unsuccessful Proficiency Testing:

Zero (0) facilities had a first occurrence of unsuccessful proficiency testing (two out of three in a row).

Facilities with a second occurrence of unsuccessful proficiency testing was zero (0).

Complaint Investigations:

There was one (1) complaint investigation conducted by this regional office the past quarter. This complaint investigation was substantiated.

Motion to Accept This Report: Dr. McDonald.
Second: Ms. Voigt.
Report : Approved.

Topics for Discussion:

1-Blood Volume Testing

Representatives: Deana O'Brien
John Reyes Guerra
Daxor Corporation

The representatives from this company discussed the application of this technique for blood volume measurement and clinical laboratory oversight.

This method of determining blood volume (tagged albumen) utilizes radioactive materials injected into the body with subsequent blood volume determinations based on radiotopic determinations.

After discussion board members determined the oversight of this test is covered under the license and oversight of nuclear medicine science and the Division of Radiological Health.

The board authorized the draft of a position statement to be drafted by Mr. Sykes. The board will review the draft statement in October.

Motion: Dr. McDonald.
Second: Dr. Neff.

2- Baptist Healthcare Corporation
Baptist Memorial Hospital-Tipton
Waid Ray, Attorney

Mr. Ray appeared before the board to request board members consider authorizing a position statement or policy concerning employment related drug screens performed by licensed medical laboratories. The board has determined in the past that these tests are not "clinical" in nature for they are not performed for diagnosis, prophylaxis, treatment or health advice but for employment purposes only.

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Mr. Ray is concerned about the liability of medical laboratory

personnel having knowledge relative to performing drug screens in an atmosphere not clinically related but for the sole purpose of employment decisions. The issues revolve around employment decisions based on laboratory testing and could possibly cause repercussions for the laboratory personnel via a civil suit.

Board members discussed and recommended a “chain of custody” environment be established, where these employment specimens could be sent to a certified forensic toxicology accredited laboratory outside the hospital that performs “chain of custody” testing procedures to include -employment screens. Employment screens to not require a physicians order because these screens are not considered to be a laboratory test.

Note: Employment (employee) drug screens may include those pre-employment, continued employment, or federal law.

The board reviewed the position statement drafted by Mr. Ray and Mr. Sykes and approved the draft.

Acceptance Motion: Dr. McDonald.

Motion Second: Dr. Neff.

Position statement draft: Approved.

3- Cell Circulating Tumor Test (CTC)

Onezean Otey, Jr., Consultant I/Surveyor
Middle TN Regional Office

Mr. Otey asked for clarification concerning the category of the medical laboratory personnel qualified to perform the Circulating Tumor Cell Test.

This clinical assay is utilized in the enumeration of circulating tumor cells (CTC) of epithelial origin found in whole blood, and is basically considered a form of flow cytometry testing. A pathologist performs the final test interpretation.

This technology is new to laboratory medicine.

The board determined that any licensed medical laboratory professional appropriately trained could perform this test.

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4. Genetics Associates
Nashville, TN

V.G. Dev, Ph.D.
Linda Bull
Richard Bull
Sophia S. Stewart

Onezean Otey, Jr., Consultant I/Surveyor
Middle TN Regional Office

This request is for the consideration of off-site testing procedures for cytogenetic screenings in the home environment.

After discussion, board members considered this portion of cytogenetic testing be an active part of the anatomic laboratory process and determined an anatomic facility license would be necessary with laboratory standards being met per Rules 1200-6-3.

A motion was made to have Mr. Sykes draft a position paper stating cytogenetic testing procedures must be performed in a licensed laboratory that is under the pervue of the board. (Tennessee Code Annotated 68-29-121), Section C states testes must be referred to a licensed facility.

Motion: Dr. Ferguson
Second: Dr. McDonald.

This motion for a position statement was rescinded in favor of the T.C.A. statute.

5. Mary Hamblen, Consultant II/Surveyor
West Tennessee Regional Office

Ms. Hamblen requested board members clarify the status of facility licensure for the laboratory that performs the grossing, cutting and staining of specimens if those specimens (slides) are read by a pathologist in a different licensed laboratory location from where these procedures were performed.

Board members determined a laboratory license was necessary if grossing, staining or cutting of clinical specimens was performed in any location outside a licensed clinical laboratory.

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Office of General Counsel Report:

Ernest Sykes, Jr.
Advisory Attorney

- 6- Board members discussed the application of board review concerning a hospital that has been granted a point of care exemption request and is purchased by another health care entity.

The question concerned the “moving” of the former exemption into and under the umbrella of the new acquired hospital’s previously granted exemption for alternate site testing without additional board approval for the new location.

Board members agreed a new exemption request must be submitted reflecting the current arrangements between hospitals.

7. Policy on Board Consultant

Mr. Sykes reviewed this policy with the full board members: It is the policy of the Tennessee Medical Laboratory Board that, so long as the Board’s Program Director is a licensed Medical Laboratory Supervisor and/or Medical Laboratory Director as those terms are defined at rule 1200--6-1-.01, the Program Director shall serve as the Board consultant for the purposes of reviewing and signing off on disciplinary complaints which are made to the Department of Health’s Bureau of Investigations

No further action was taken on this policy by the Personnel & Education Committee. This policy is included in the minutes as a matter of record.

Mr. Sykes reported on the following:

Rules:

1-Continuing education, unethical conduct licensure requirements chemical terrorism exemption (06-1421) (Tenn. Comp. R. & Regs 1200-6-1-.03, .12, .18, .22; 1200-6-3-.02. These rule amendments went to rulemaking hearing on December 19, 2006; they were adopted by the Board on January 26, 2007 and sent to the Attorney General for review on February 8, 2007. The rules were signed by the Attorney General and returned to OGC in late June 2008. They will be filed with the Secretary of State’s office by the end of July,

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These rules will become effective prior to the next regularly scheduled Board meeting in October 2008 or shortly thereafter.

Continuing education qualifications of testing personnel, use of titles in advertising (Tenn. Comp. R. & Regs. 1200-6-1-.12, .22, 1200-6-2-.08, 1200-6-3-.20) These rule amendments were authorized on January 10, 2008 to go to rulemaking hearing. The Justification Memo submitted March 19, 2008 received final approval on June 19, 2008. The rulemaking hearing accordingly has been rescheduled for the next Board meeting, October 9-10, 2008.

Litigation:

The Office of General Counsel, Tennessee Department of Health, has two (2) open cases pertaining to the Tennessee Medical Laboratory Board.

A motion to accept this report was made by: Dr. McDonald.
Second: Ms. Davis.
The report was accepted as read.

Financial Report:
Lisa Tittle
Fiscal Office

A copy of this report was included in the board books and is currently on file in the administrative office.

The report was accepted as written; no vote.

Bureau of Investigations (BIV) Report:
Juanita Stone: Disciplinary Coordinator BIV

The following actions were reported to board members:
New Complaints April-June 2008: Ten (10)
Closed Complaints: One (1)
Closed No Action: (1)
Closed-Referred to OGC: (0)
Currently Opened Complaints: Fourteen (14)
Types of Complaints: Eight (8) of the fourteen (14) complaints are for malpractice or negligence.
Care of Services: Zero (0)
Unlicensed Practice One (1)

All complaints must go through the Bureau of Investigations for review before they are closed or referred to the Office of General Counsel.

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Motion to Accept Report: Dr. McDonald.
Second: Dr. Ferguson.

The report was accepted as read.

Waived Testing Procedures:

No additional testing procedures were added to the waived test list.

Review Eligibility of Medical Laboratory Director:

The Board reviewed no new applications during this quarterly meeting.

Board Policy:

See personnel & education minutes.

Other Business:

Board members were given copies of the meeting schedule for 2009.

Statement of Next Meeting:

The next meeting will be held October 09, 2008 beginning at 9:00 am CDT in the Iris Room, Heritage Place 227 Metro Center, Nashville, TN 37243.

Record of Adjournment:

The meeting was adjourned at 12:20 pm CDT, on a motion properly presented by Dr. McDonald.
Second: Ms. Davis.
Adjourn Request Approved.

Norman Crowe
Chairman, Tennessee Medical Laboratory Board

Date

1. **Wellmont Holston Valley Medical Center**
130 W. Ravine Road
Kingsport, TN 37660

Facility Representative: Richard Doyle
Point of Care Coordinator

This exemption request was to permit Licensed Paramedics to perform and report Troponin-I, Myoglobin, CK-MB, and BNP on the Biosite Triage Instrument in the Emergency Department.

Motion: Dr. Neff.
Second: Ms. Wilson.
Exemption Granted.

Note: Dr. Ferguson recused himself from the discussion and vote.

2. **Johnson City Medical Center**
400 State of Franklin Road
Johnson City, TN 37604

Facility Representative: Karen Cox, MT
Point of Care Coordinator

Board members approved this exemption request to permit Licensed Registered Nurses, Licensed Practical Nurse, and Respiratory Therapists to perform and report sodium, potassium, chloride, BUN/Urea, glucose, creatinine, ionized calcium, total CO₂, hematocrit, lactate, blood gases and anion gap utilizing the i-STAT instrument and methodologies in the (1) Neonatal Intensive Care Unit (NICU), (2) Pediatric Intensive Care Unit (PICU), and (3) the Pediatric Ambulance used in the transport of neonates, infants and pediatric patients.

This was an addition to an exemption previously granted earlier by the Board.

Motion: Dr. McDonald.
Second: Dr. Neff.
Exemption Granted.

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3. **Northside Hospital**
401 Princeton Road

Johnson City, TN 37605-1753

Facility Representative: Karen Cox, MT
Point of Care Coordinator

This request was for Licensed Registered Nurses, Licensed Practical Nurses, and Radiological Technologists to perform and report creatinine testing procedures utilizing the i-STAT instrument and methodologies. The location of these testing procedures is the Radiology Department. This was an addition to an exemption previously granted by the board.

Motion: Dr. McDonald.
Second: Dr. Neff.
Exemption Granted.

4.

St. Mary's Health System, Inc.
900 E. Oak Hill Avenue
Knoxville, TN 37917-4505

Facility Representative: Jo Ann Orr, MT (ASCP)
Regional Laboratory POCT Coordinator

This exemption request was for the following:

1-Permits Perfusionists to perform and report blood gases and electrolytes on patients undergoing open-heart procedures in the Surgical Suites. The instrument and methodology utilized in the performance of these tests is the AVL Opti.

Motion: Dr. McDonald.
Second: Dr. Neff.
Exemption Approved.

2-Permits Perfusionists to perform and report activated clotting times (ACT's) during surgical procedures utilizing the Hemochron instrument. These tests are performed in the Surgical Units of this facility.

Motion: Dr. McDonald.
Second: Dr. Neff.
Request Approved.

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5.

T.C. Thompson Children's Hospital
910 Blackford Street
Chattanooga, TN 37403-1405

Facility Representative: Mary Hooper, MT
Manager, Support Services

This facility request was to permit Licensed Respiratory Therapists, and Licensed Registered Nurses to perform and report pH, PO2, PCO2, sodium, potassium, chloride, CO2, Ionized calcium, glucose, hematocrit, BUN, lactate, troponin, and creatinine tests in the Emergency Department utilizing the i-STAT instrument.

Motion: Dr. Neff.
Second: Dr. Ferguson.
Approved.

6. **Methodist University Hospital**
1265 Union Avenue
Memphis, TN 38104

Facility Representative: Harriet Bateman, BSMT (ASCP)
Point of Care Coordinator

This facility request was to permit Registered Nurses, Licensed Practical Nurses, Cardiovascular Techs, Registered Radiology Technologists and Perfusionists to perform and report activated clotting times (ACT's) in the following locations: Cardiovascular Units, Surgical Settings, Medical ICU, Surgical ICU, Cardiovascular Step-down Units and Special Radiology Units. The instrument utilized in the performance of these tests is the i-STAT.

Motion: Dr. Neff.
Second: Dr. McDonald.
Approval. *

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7. **Methodist Healthcare-North**
3960 New Covington Pike
Memphis, TN 38218-2504

Facility Representative: Harriet Bateman, BSMT (ASCP)
Point of Care Coordinator
Jane Nichols

This facility requested an exemption to permit Registered Nurses, Licensed Practical Nurses, Cardiovascular Techs, Registered Radiology Technologists, and Perfusionists to perform and report activated clotting times (ACT's) in the following locations: Cardiovascular Units, Surgical Settings, Medical ICU, Surgical ICU, Cardiovascular Step-down Units and Special Radiology Units.

The instrument utilized in the performance of these tests is the i-STAT.

Motion: Dr. Neff.
Second: Dr. Ferguson.
Request Approved.*

**8. Methodist Healthcare South
1300 Wesley Drive
Memphis, TN 38116-6426**

Facility Representative: Harriet Bateman, BSMT (ASCP)
Point of Care Coordinator
Jane Nichols

This request was to permit Registered Nurses, Licensed Practical Nurses, Cardiovascular Techs, Registered Radiology Technologists and Perfusionists to perform and report activated clotting times (ACT's) in the following locations: Cardiovascular Units, Surgical Settings, Medical ICU, Surgical ICU, Cardiovascular Step-down Units and Special Radiology Units. The i-STAT instrument is utilized in the performance of these tests.

Motion: Dr. McDonald.
Second: Dr. Neff.
Exemption Approved.*

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**9. Methodist Lebonheur Healthcare-Germantown
7691 Poplar Avenue
Memphis, TN 38138**

Facility Representative: Harriet Bateman, BSMT (ASCP)

Point of Care Coordinator
Jane Nichols

This request was to permit Registered Nurses, Licensed Practical Nurses, Cardiovascular Techs, Registered Radiology Technologists, and Perfusionists to perform and report activated clotting times (ACT's) in the following locations: Cardiovascular Units, Surgical Settings, Medical ICU, Surgical ICU, Cardiovascular Step-down Units, and Special Radiology Units. The i-STAT is utilized in the performance of these clinical tests.

Motion: Dr. McDonald.

Second: Dr. Ferguson.

Exemption Approved.*

* Ms. Davis and Ms. Wilson, recused themselves from the discussion and vote.

**10. Jackson Madison County General Hospital
708 West Forest Avenue
Jackson, TN 38301**

Facility Representative: Jerry Barker
Laboratory Manager II

This exemption request permits Licensed Registered Nurses, Certified Registered Nurse Anesthetists, and Radiology Technicians to perform and report activated clotting times (ACT's) in the Surgery Department utilizing the Medtronic ACT Plus Instrument. These tests are performed in the Surgery Department.

This was an addition to an exemption granter previously.

Motion: Dr. Neff.

Second: Dr. McDonald.

Request Approved.

**11. Middle Tennessee Medical Center
400 North Highland Avenue
Murfreesboro, TN 37133-1178**

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Facility Representative: Marylou Turpin, MT
Marvin Wagster
POCT Outreach Services

This request was for Registered Nurses and CRNA's to perform and report

activated clotting times (ACT's) in the Cardiac Laboratory, and Operating Rooms of this facility.

This request changed the methodology from the Medtronic ACT Plus instrument to the i-STAT instrument.

Motion: Dr. Ferguson.

Second: Dr. Neff.

Request Approved.

Dr. McDonald and Ms. McDonald-Spakes recused themselves from the discussion and vote.

12.

**StoneCrest Medical Center
2009 StoneCrest Blvd.
Smyrna, TN 37167**

Facility Representative: Ann Berhnart, MT
Point-of-Care Coordinator

This request added a new category of licensed allied health personnel to the original exemption. The request was to permit Registered Nurses and Radiological Technologists to perform and report activated clotting times (ACT's) in the Cardiovascular Laboratory (CVL) utilizing the Hemochron Elite instrument.

(The original request was approved in April 2006)

Motion: Dr. Neff.

Second. Dr. Ferguson.

Exemption Approved.

13.

**Summit Medical Center Laboratory
5655 Frist Blvd.
Hermitage, TN 37076**

Facility Representative: Rebecca Patterson, MT
Point of Care Coordinator
Lawanda Davis, MT
Laboratory Manager

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This exemption request was to permit Licensed Magnetic Resonance Imaging Technicians, CT Technologists and X-ray Technologists to perform and report creatinine testing procedures utilizing the i-STAT instrument and methodologies in the Summit Imaging Center 100 Physician's Way Suite 100 Lebanon, TN 37090.

Motion: Dr. Neff.
Second: Dr. McDonald.
Request Approved.

**14. Diagnostic Laboratories, Vanderbilt University Medical Center
22nd & Pierce 4605 TVC
Nashville, TN 37232-5310**

Facility Representative: Terri Tubb
Point of Care Testing Supervisor

The board approved this request for Licensed Registered Respiratory Therapists to perform and report activated clotting times (ACT's) in the Cardiovascular Intensive Care Unit (CVICU) utilizing the Hemochron Signature Elite instrument.

This request extended the category of personnel and testing location for previous request granted by the board.

Motion: Dr. McDonald.
Second: Dr. Ferguson.

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**INITIAL FACILITY LICENSES: REGIONAL SURVEYOR RECOMMENDATION/
BOARD RATIFICATION:**

**1-Middlesboro ARHP LMU D-Com
Division of Outpatient Services
6965 Cumberland Gap Parkway**

Harrogate, TN 37752

Medical Laboratory Director: John Williamson, M.D.
Physician, OB/GYN

Specialties: Collection Station

Surveyor: Julia Daniels, Consultant II/Surveyor
East Tennessee Regional Office

Motion: Dr. Ferguson.
Second: Dr. McDonald.
License Approved.