

The Review

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On the left-hand side is Mrs. Vanessa Santiago-Miranda, NBIMC Lead Health Science Specialist. On the right-hand side is Mrs. Ai Marrero, NBIMC Program Analyst.

NBIMC Staff Recognition and Awards

Written By: Julia Wolfrey, MHA

On January 10th, 2024, Captain Tenezamora presented NBIMC staff members Mrs. Vanessa Santiago-Miranda and Mrs. Ai Marrero with awards for their incredible achievements and honorable contributions to NBIMC. The Navy and Marine Corps Force Health Protection Command (NMCFHPC) Civilian Employee of the Quarter, 4th QTR FY23 award for Scientific II was presented to Mrs. Vanessa Santiago-Miranda, recognizing her outstanding work ethic, attention to detail, active communication, and collaborative leadership. Since 2018, Mrs. Santiago-Miranda has supported NBIMC by actively maintaining the safety of the DoD blood supply, acting as the guarantor of all HIV, hepatitis B virus, and hepatitis C virus tests. Medical readiness is ensured through Mrs. Santiago-Miranda's support of force testing. In addition to her current position with NBIMC, Mrs. Santiago-Miranda is also pursuing her Doctorate in Healthcare Administration, focusing on bloodborne pathogens in the military; her hobbies include running, reading, and trail/hikes with her twin boys and husband.

For the Admin I category, the NMCFHPC Civilian Employee of the Quarter, 4th QTR FY23 award was presented to Mrs. Marrero commending her persistent, administrative efforts, creativity, organizational skillset, and forward thinking. Additionally, Mrs. Marrero was also selected for the NMCFHPC's Civilian of the Year award. Mrs. Marrero's accomplishments continually produce efficient, timely processes while simultaneously minimizing error and waste. Mrs. Marrero joined NBIMC in Feb 2023 and since has transformed policies, regulations, goals and objectives for contract and program management.

Memos & Updates

HIV Management Service (HMS): Family Member Prefix (FMP) & Duty Codes Guide

When checking patients in using MHS Genesis, it is extremely important to select the appropriate beneficiary category (BENCAT) and patient category (PATCAT). Selecting the correct BENCAT and PATCAT ensures

that lab results are received promptly AND helps to eliminate quality assurance errors in HMS. The BENCAT is directly related with the Family Member Prefix (FMP) in HMS which consists of several choices given the patient's status. For example, if the patient is the second child of an active-duty Naval Officer, then the patient's BENCAT would be "Fam Mbr of Active Duty" and their FMP would be 02 (service member's second oldest child). The BENCAT is also directly related to the PATCAT (also called the Military Duty Codes), as the PATCAT reflects the patient's department (Army, Coast Guard, Air Force, Marine Corps, Navy, etc.) and involvement within that department. For example, the PATCAT for the same scenario above, the second child of an active-duty Naval Officer, would be N41 (N=Navy & 41 = Fam Mbr of Act Duty Sponsor). In summary, when using



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MHS Genesis to check-in patients, entering accurate BENCATs and PATCATs result in less quality control items in HMS and avoids delays in HIV testing results.

- Click <u>here</u> to view the **Genesis Patient Check-in Job Aid** with photos and examples of BENCAT and PATCAT entries in MHS Genesis
- Click <u>here</u> to view the **FULL LIST of Patient Categories** (PATCATs)
- Click here for the Patient Finder Guide which assists MHS Genesis users in choosing the correct PATCAT

HMS: NEW Specimen Quality Reports

After much collaboration, the NBIMC team and the Naval Information Warfare Center (NIWC) team published a new report tab within HMS called the Specimen Quality Reports. This new report combines several pre-existing HMS reports to reflect the performance of all sites in terms of deficiency data. Previously, the NBIMC team worked effortlessly to extract various sets of data from HMS, inputting all data into an Excel spreadsheet, also known as the Rejection Metric Reports. With the creation of the new Specimen Quality Report, sites can choose their branch and month(s) in which they want to evaluate deficiency data for. Once the HMS user has selected their site's department and month(s), they can also utilize the filter option on the report which separates individual site data by UIC.

The Specimen Quality Report breakdown (by UIC and Unit Name) is as follows...

• **Deficiency Total: Jan- Month Year** – includes D1 – D9 errors from the 1st day of the year selected to the current day, month, and year the user is accessing the report. This total reflects the deficiency data for all months selected.



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- "The Reject Count", "Total" (total # tested), and "Percent Calculation" (# of deficiencies/total 0 tests * 100) columns are provided
- Deficiency Total: Month Year includes D1 D9 errors for the individual month and year selected •
 - "The Reject Count", "Total" (total # tested), and "Percent Calculation" (# of deficiencies/total 0 tests * 100) columns are provided
- Rejection Detail: Month Year Includes D4 errors only for the individual month and year selected
 - "Site", "Barcode", "Rejection Date", "Specimen Comment", and "Rejection Type" columns are 0 provided

NBIMC requests that sites also provide feedback on these new reports. NBIMC is open to discussing any possible report features that sites deem irrelevant, confusing, or absent while simultaneously encouraging any potential, beneficial additions. Please send all feedback via email to Mrs. Ai Marrero ai.marrero.civ@health.mil and Ms. Julia Wolfrey julia.d.wolfrey.ctr@health.mil. Thank you!

Announcements 🔶

Sample Shipping Reminders

The Center for Disease Detection (CDD) reminds all sites to ship their samples ASAP. However, if samples cannot be shipped ASAP, sites are required to notify CDD if the samples are to be held and shipped within 6



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days or after the draw date. If no communication occurs regarding the shipping of samples, CDD reports that no specimens have been received, marking the missing samples as D2 rejection errors. However, this methodology creates conflict, as the samples that have been rejected often end up arriving after they have already been marked as "not received". Therefore, it is extremely important for all sites to consistently communicate with CDD, notifying them of their projected shipment timeline to minimize error and maximize system efficiency. Some sites samples are not arriving to CDD until 1 month after the draw date, so active notifications are necessary moving forward in these situations.

POC Site Change Reminders



CDD requests all submitting site POC's to inform CDD if/when they will be leaving a site. Additionally, POC's are required to inform CDD of any new POC's and/or any changes to the site's contact list. By continually communicating with CDD, all sites will remain up to date as staff changes occur, allowing for current POC listings. Please email Military@cddmedical.com AND dha.bethesda.Walter-Reed-Med-Ctr.mbx.nbimc@health.mil with any POC site changes.