**HELPFUL INFO FOR CORRECTING SPECIMEN DEFICIENCIES**

NBIMC sends out up to 4 different daily emails to affected POC user sites that deal with “HIV specimen deficiencies”. There are 2 of these email subject titles that the deficiency can be corrected if done in time and they are as follows:

**Pending D1 Barcodes**- sites receive this email if CDD has received the actual specimens but have not received the electronic orders for those specimens. If your site has received this email for several days in a row for the SAME barcode numbers, there are several things to check out.

**For MRRS Users**

\*\* POC needs to review the Excel spreadsheet in the deficiency email to verify the barcode numbers actually match what was typed into MRRS. NBIMC sees a lot of “fat-fingering” of the barcode numbers or transposing of the numbers

 (i.e. typing “N23A instead of “N32A”)

\*\*Need to check to see if the barcode number has been “verified” in the system and will show as a “pending” entry. Make sure to hit the send/receive button.

\*\* MRRS users if you believe your issue might be IT related, call the MRRS helpdesk at 1-800-537-4617.

**For CHCS Users**

\*\* CHCS users- after you’ve uploaded the batch make sure that the system status is reflected as “INSHPTRN”. If the status is showing as anything else, it’s possible that the uploaded batch is “stuck” and did NOT make it out of your site’s firewall.

\*\* For the CHCS- lab POC verifies with your lab manager or contact your site’s IT POC for assistance.

**REMEMBER**- the specimen(s) will be discarded at 0400(CST) on the morning of the 8th day from the “date specimen received” date that’s reflected on the Excel spreadsheet that’s in the deficiency email. The specimens may be rejected as “too old to test” if the electronic orders are delayed.

“P**ending D2 Specimens**- sites receive this email if CDD has received the electronic orders but has NOT received the actual specimens. Numerous times CDD has rejected the D2 specimens and then the actual specimens arrive to CDD afterwards. The specimens are tested but it requires additional work for CDD and NBIMC to remove the rejections from our systems.

**REMEMBER**- the affected specimen and associated barcode number is rejected at 0400 (CST) on the morning of the 9th day from the date the barcode order was received at CDD. If your site contacts CDD in advance of a D2 issue getting rejected, they will work with you to solve it.

**HOLIDAY CLOSURES**

**Veteran’s Day-11-10-17-** The Federal Government and NBIMC will be closed to observe this date. CDD offices are open.

**NBIMC SURVEY RESULTS**

In June and July 2017, NBIMC sent out a survey to our users to rate our Customer Service. NBIMC has over 1100 POC users in our database and we only received a small total of responses. In June the survey was sent in an Excel format. In July, we sent the same survey questions in a Survey Monkey format and received a smaller amount of responses. Below is a bar graph to reflect those responses to the survey.

Most of the “no answer” totals (48 of the 57) came from the section of the survey that requested feedback from the POCs in 2 areas-

1. POC suggested topics for newsletter articles
2. POC suggested changes for the daily deficiency emails

The suggestions for newsletters articles received were for more information on:

1. False negative-false positive info
2. More info on the spin down process for the tubes

**ORDERING CDD SUPPLIES**

CDD requests that site POC’s review their supply inventory in advance of their monthly draws. All blood draws must be done using supplies furnished by CDD. Supply shipments are sent through FEDEX by ground shipment in CONUS. That shipping method takes approximately 3 days to arrive at a CONUS site. Please do not wait until 2 days prior to a weekend drill to order supplies. When a site waits this close to place an order-this forces CDD to send that shipment as “Next Day Delivery” to ensure that the site receives the supplies in time. This method of shipment costs more for CDD to ship.

**NO MORE TEST CODE 104 ORDERS**

The use of test code 104 ended on 1-1-2017. CDD is still receiving orders in their lab with this test code. CDD will discard any specimens with code 104 and the site will need to redraw the patient and submit the order under the correct test code of 105.