

Health Care Providers Newsletter November 2024

LifeLabs Healthcare Providers' Conference 2024

Dr. Eugene Yeung, MD. FRCPC, FCCM, Medical Microbiologist

The LifeLabs Healthcare Providers' Conference at Hilton Vancouver Metrotown on October 10 was a success! We want to thank all the attendants and presenters for their participation. See photos on the last page of this newsletter. We look forward to seeing you all next year!

Time	Duration	Торіс	Speaker
5:00pm – 6:00pm	1 hour	Registration & Dinner Please sign in and collect name badge at the registration desk	
6:00pm – 6:15pm	15 Minutes	Opening Remarks and Welcome	Emcee – Dr. Graham Segal
6:15pm – 6:35pm	20 Minutes	Getting Accurate &Timely Test Results	Julie Kelly
6:35pm – 6:40pm	5 minutes	Q & A	
6:40pm – 7:00pm	20 Minutes	Immunodeficiency Testing in Lab Medicine	Dr. Peter Van Den Elzen
7:00pm – 7:05pm	5 minutes	Q & A	
7:05pm – 7:25pm	20 Minutes	New Concepts of Cell Free DNA: Circulating Tumor DNA	Dawn Siciliano
7:25pm – 7:30pm	5 minutes	Q & A	
7:30pm – 7:50pm	20 Minutes	What's new in antifungal susceptibility testing?	Dr. Eugene Yeung
7:50pm – 7:55pm	5 minutes	Q & A	
7:55pm – 8:15pm	20 Minutes	Digesting the Data: Food Sensitivities Without the Hype	Joe Klassen
8:15pm – 8:20pm	5 minutes	Q & A	
8:20pm – 8:35pm	15 minutes	Questions & Comments	
8:35pm – 8:40pm	5 Minutes	Closing Remarks	Dr. Graham Segal

Urine Drug Testing – Ordering Basics

Jan Palaty PhD FCACB, Clinical Biochemist and Joanna Jung PhD FCACB, Clinical Biochemist

Background

A standard MSP-reimbursed urine drug screen includes opiates, amphetamines, benzodiazepines, cocaine metabolite and methadone metabolite only. Additional tests (e.g. fentanyl, oxycodone, buprenorphine) must be requested explicitly.

Confirmation by mass spectrometry (MS) is performed only when requested except for clonazepam, fentanyl, buprenorphine, hydromorphone and zopiclone, where it is added automatically. As per guidance by MSP, this should only be requested when outcome would significantly affect patient management.

Don'ts

To ensure your patient receives the tests that you are requesting, avoid vague terms on the lab requisition such as:

- Opioids, UOXYs, synthetic opiates
- Uppers, downers, side, stimulants, anti-depressants, mushrooms
- Illicit drugs or substances
- **Abbreviations**

Don't plan to use results from MSP-reimbursed samples for legal purposes: they have not been collected using a chain of custody protocol.

LifeLabs does not test solids or non-biological materials for the presence of drugs.







Do's

Use specific drug names to avoid delays and the wrong tests being performed.

Order a confirmation by writing "confirm [drug test] if POSITIVE" on requisition to minimize turnaround time.

To learn what is currently in the local drug supply, visit <u>drugcheckingbc.ca</u>. Illicit drugs in circulation can vary markedly over the course of even a few months.

Consider including urine creatinine as part of a urine drug screen UDS request. It is a reliable indicator of urine dilution which may explain unexpectedly negative results.

Obtain results for urine drugs not in LifeLabs' testing menu (e.g. xylazine) through the 'UDS-137' broad-spectrum test available via LifeLabs from the Provincial Toxicology Centre at the BCCDC. <u>Caution</u>: this test is qualitative (i.e. no concentrations are provided) and may take up to two weeks to process. For details, visit <u>elabhandbook.info/PHSA/Default.aspx</u> and search for 'UDS-137.'

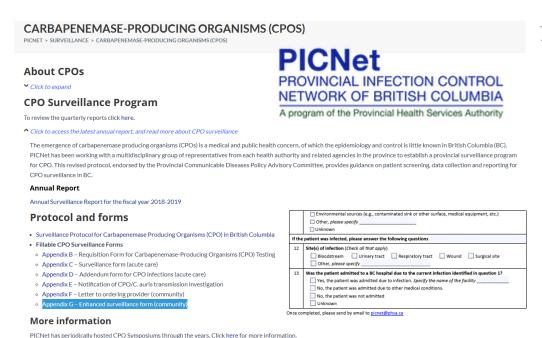
LifeLabs encourages health care practitioners to call us and ask for the on-call biochemist with any questions related to analytical or interpretive questions. While we store samples for only 2 weeks, we may have enough information to answer other questions outside of this 2-week window; e.g. other drugs present well past this window.

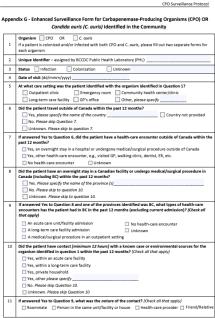
Predictable Antibiogram Series - Carbapenemase-producing organisms (CPOs)

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This time I want to take a different turn in this Predictable Antibiogram Series and talk about carbapenemase producing organisms (CPOs)! Depending on the genotypes, the CPOs' susceptibility patterns can be somewhat unpredictable. The only thing that is predictable is that they are resistant to all carbapenems, such as meropenem and ertapenem, which are very broad-spectrum antimicrobials. This means the infectious diseases (ID) and infection prevention and control (IPAC) teams would likely need to be involved to help with special authority applications of some special antimicrobials and prevention of further spread of CPOs, respectively.

I recently attended a Provincial CPO Symposium on October 23, hosted by the Provincial Infection Control Network of British Columbia (PICNet), where many microbiologists and IPAC practitioners attended to help develop provincial guidance for treatment and prevention of CPO infections. One proposed idea is to raise awareness to clinicians to fill out the **enhanced surveillance form for CPOs identified in the community** and email it to picnet@phsa.ca. This form can be found in Appendix G at https://picnet.ca/surveillance/cpo/. Filling the form would help IPAC practitioners to contact trace the source of CPOs and prevent further spread!













LifeLabs Healthcare Providers' Conference 2024 — Pictures!

Jolie Quinton, Senior Administrative Assistant – Medical Scientific







