

INTRODUCTION of NEW AUTOMATED ERYTHROCYTE SEDIMENTATION RATE (ESR) ANALYZER

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Shared Health sites, Health Sciences Centre and Westman Laboratory, will be switching to a different automated ESR analyzer shortly.

How does this affect you?

- This analyzer still requires an EDTA 4 mL tube with a minimum volume of 2 mL.
 - The instrument, however, measures the volume of sample and will reject it if it is low volume and thus need to be recollected.
- Labelling of the patient sample is a key change. If the patient sample is not labelled properly, (as shown in the pictures below), there is a chance of the analyzer not being able to perform the testing.

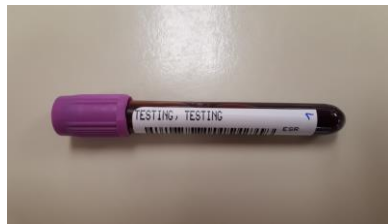


Figure 1 Note label gap at back to allow for testing



Figure 2 Smooth label placed over manufacturer's tube label

- The analyzer uses optical sensors that look at the patient's blood sample through the EDTA tube wall instead of aspirating blood using a needle. Therefore, labels must be placed in strategic locations on the tube to allow for analysis.
- Failure to follow the required labelling change could lead to erroneous results being reported out on samples or an increase in result turnaround times.
- Samples should have labels of the same dimensions as the manufacturer label (not wider or longer) to prevent rejection of sample.

When is this change happening?

Validation of the instruments is already in progress and will be completed soon. A go-live date will be released shortly.

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