When the Ebola virus first entered the United States last August, a national issue was immediately followed by a national fear. What has resulted in the months since is an Ebola preparedness policy that involves government agencies and the healthcare and travel industries.

Since last fall, Laboratory Alliance has worked closely with the Onondaga County Health Department, the New York State Department of Health and our owner hospitals to define our roles should a patient suspected of Ebola — Person Under Investigation (PUI) — enter our healthcare system.

Our role in this process is to work with Crouse Hospital, St. Joseph's Hospital Health Center and Upstate University Hospital Community Campus to establish a procedure to safely collect the first blood specimen needed to confirm or rule out Ebola virus, and to provide capabilities for other Point of Care (POC) tests that may need to be performed at bedside.

About the virus

Ebola was first discovered in 1976 near the Ebola River in what is now the Democratic Republic of the Congo and, until 2014, was limited to sporadic outbreaks in the African countries of Guinea, Liberia and Sierra Leone.

To date, two imported cases and two U.S. acquired cases in healthcare workers have been reported in the United States. All four of these cases took place last fall. The first case resulted in a death and the remaining three, including two healthcare workers who cared for the first case, recovered and were discharged in late October and early November.

Ebola virus disease is a severe, often fatal illness. Signs and symptoms of Ebola typically include: fever, headache, muscle pain, sore throat, weakness, diarrhea, vomiting, stomach pain, lack of appetite, and abnormal bleeding. A person with Ebola is not contagious until symptoms appear. Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola virus.

Ebola is not spread through casual contact; therefore, the risk of an outbreak in the U.S. is very low. The healthcare community knows how to stop Ebola’s further spread: thorough investigation of cases, isolation of ill people, contacting people exposed to the ill person, and further isolation of contacts if they develop symptoms.

Ebola is spread through direct contact with the blood or bodily fluids of an infected person who have symptoms or through exposure to objects (such as needles) that have been contaminated with infected secretions. The virus in the blood and body fluids can enter another person’s body through broken skin or unprotected mucous membranes in the eyes, nose or mouth.

Individuals who do not have symptoms are not contagious. In order for the virus to be spread to another person, someone would have to have direct contact with a person who is having symptoms.

State and Local Actions

Last fall, soon after the first reports that Ebola had entered the U.S., New York State led the response to establish safe policies by expanding upon CDC protocols and imposing additional measures to identify and monitor individuals who recently spent time in one of the three countries most affected by Ebola or individuals who have recently cared for patients with the virus.

New York State identified eight of its hospitals where a confirmed patient will receive treatment. One of those is Upstate University Hospital in Syracuse. The other is the University of Rochester Medical Center, and the rest are downstate.

In the case that a patient is suspect, every single hospital follows a protocol to manage PUIs until an Ebola virus disease diagnosis is either confirmed or ruled out.

This person, or PUI, has both consistent signs or symptoms and risk factors as follows:

1. Fever
2. Headache
3. Muscle pain
4. Diarrhea
5. Vomiting
6. Abdominal pain
7. Generalized rash
8. Redness and/or swelling of the hands and feet
9. Sore throat
10. Cough
11. Difficulty breathing

Preparedness is Key in Controlling the Ebola Virus

By Anne Marie Mullin, Senior Vice President

Ebola is one of the world’s most virulent diseases. It comes from an extended family of viruses called Filoviridae, which also include the deadly Marburg virus. It is a swift and effective killer, known to kill up to 90 percent of those it infects. And it is a “hemorrhagic fever virus,” which means it causes fluid to leak from blood vessels, resulting in a dangerously low drop in blood pressure. (pbs.org/Ruth Tam)
Vitamin D Assays Now Standardized by the National Institutes of Health

To ensure accurate measurement and standardize the laboratory measurement of vitamin D across methods and manufacturers, the National Institutes of Health, Office of Dietary Supplements recently established the Vitamin D Standardization Program (VDSP). The assay used by Laboratory Alliance, Liaison® 25 OH Vitamin D TOTAL Assay, has received certification from the VDSP. Marketed by DiaSorin Inc., the assay met the VDSP requirements, and no adjustments to the assay or its calibrations were needed. A standardized laboratory measurement is one that is accurate and comparable over time, location and laboratory procedure. The LIAISON® 25 OH Vitamin D TOTAL Assay uses chemiluminescent immunoassay (CLIA) technology for the quantitative determination of 25-hydroxyvitamin D and other hydroxylated vitamin D metabolites in human serum, EDTA-plasma or lithium heparin plasma to be used in the assessment of vitamin D sufficiency using the LIAISON® Analyzer family. Serum total 25-hydroxyvitamin D [25(OH)D] concentration is used to assess an individual’s vitamin D status. Research has consistently shown that there is a great deal of variation in 25(OH)D assays. This assay variation impedes pooling of 25(OH)D results from different studies in systematic reviews for the specific purpose of determining dose-response and/or clinical cutpoints. The VDSP was established to correct this problem.

The VDSP is a collaborative initiative organized by the Office of Dietary Supplements and includes collaboration with the National Institute for Standards and Technology, the Centers for Disease Control and Prevention, the Vitamin D External Quality Assessment Scheme, the College of American Pathologists, the American Association for Clinical Chemistry, the international Federation of Clinical Chemistry and Laboratory Medicine, along with national surveys and collaborators around the world.

Hosting Visitors from Guthrie Clinic and Roche Diagnostics

In December, Laboratory Alliance welcomed six visitors from the Guthrie Clinic’s Sayre, Pa., and Corning, N.Y., sites, and three from Ventana Medical Systems. They came to see our Ventana’s Vantage System for positive patient identification in use in our Histology Department and Gross Dissection Rooms at the three Rapid Response Laboratories. Following the meeting, they joined us for a photo in the lobby of our Corporate Offices.

Pictured are, front row from left, Laboratory Alliance’s Operations Center Director Rita Romano, Guthrie Clinic’s LIS Coordinator Joanne Moore, Guthrie Clinic’s Cytology Supervisor Roberta Demoski, Guthrie Clinic’s LIS Coordinator Lois Vanalstine, and from Roche Tissue Diagnostics is Carolyn Pressman.

The back row, from left, includes Laboratory Alliance’s Histology Department Manager John Daucher, Guthrie Clinic’s Administrative Director Ceil Miller, Guthrie Clinic’s Pathology Assistant Logan Lathrop, Guthrie Clinic’s Histology Supervisor Ed Sperduto, Roche Tissue Diagnostics’ Renee Tall and Geoffrey Torrance and Laboratory Alliance’s Senior Vice President Anne Marie Mullin.

Technology Corner

The following new tests and test methods have been added to the menu of tests performed by Laboratory Alliance:

In January, the Microbiology Department implemented a new molecular (PCR) assay for the detection of Bordetella pertussis.

The assay requires a different specimen collector, liquid Amies (blue cap). Collect nasopharyngeal specimens with blue cap swab and place in the white cap transport tube, discarding the white cap. If the former orange cap collector (Amies with charcoal) is received, the specimen will be sent out to one of our reference labs that is able to accept this collector.

Contact our Client Services Department at 315-461-3008 to order the new collection device.

Outreach clients may speak with their Laboratory Alliance Account Representative in order to have the collection device added to individual custom supply order forms as applicable.
Preparedness is Key in Controlling the Ebola Virus, continued

Physical symptoms and exposure within the 21 days before the onset of symptoms to blood and body fluids of an infected person. Other factors presenting some risk include direct contact with a person with Ebola and close contact in households, healthcare facilities or community settings with a person with Ebola while the person is symptomatic.

Because Ebola can spread quickly within healthcare settings, such a patient will be isolated and only specially trained hospital staff wearing appropriate personal protective equipment (PPE) will have access to the patient. Dedicated medical equipment is used and proper sterilization and disposal of instruments is critical.

When a patient arrives at a local hospital and the questions asked during triage point to the possibility of Ebola, the Onondaga County Health Department is contacted. Following strict guidelines and prior procedural training with Laboratory Alliance professionals to safely collect that first specimen, the hospital healthcare worker draws the patient’s blood and disinfects the tubes of blood. The bagged tubes are given to Laboratory Alliance personnel who are certified to pack them in the box in which they will be transported to Albany. This takes place in a “clean” room near the patient’s location. This patient will await transfer to one of the eight state Ebola Treatment Centers should the test be positive. Positive patients in Syracuse will, most likely, be transferred to Upstate University Hospital, where a special team is trained for such care.

Simultaneously, the Onondaga County Health Department alerts the New York State Health Department, which sends a courier to pick up the boxed specimens for transport to New York State’s Biodefense Laboratory in Albany. This specially designated lab runs the test immediately.

Part of our preparedness was to find out from the hospital’s intensivists what laboratory tests are absolutely critical to perform while waiting for the results of the Ebola virus test. Some diseases have similar symptoms, such as malaria or septic shock, and timing is critical to diagnose and begin treatment should the Ebola test be negative.

Laboratory Alliance has invested in two instruments used for near-patient testing. These portable diagnostic devices, the Piccolo Xpress™ blood chemistry analyzer and the pocH-100i™ hematology analyzer, offer capabilities to test a limited number of samples daily. They were purchased to round out the menu of near-patient tests that could be available for the patient.

The portable diagnostic devices offer capabilities to test a limited number of samples daily and are very user friendly.

We are dedicated to working alongside the county and state health departments and the hospitals, healthcare professionals and other county services in establishing the best procedures on how to handle the virus in the unlikely event that we have an affected person(s).

Our immediate plans call for us to work with St. Joseph’s, Crouse and Upstate University’s Community Campus hospitals to run simulation drills, allowing everyone to step through a real-life situation before it may ever become a reality. Also, we will continue to grow our list of staff members who are certified in packaging Category A Dangerous Goods.

To learn more about the Ebola virus disease, visit the Centers for Disease Control and Prevention website and search “Ebola,” or log on to www.cdc.gov/vhf/ebola/. New York State Department of Health, www.health.ny.gov, has a page titled “Get the Facts About Ebola” and the Onondaga County Health Department website, at ongov.net, has an Ebola fact page.
An Overview of Laboratory Alliance’s Transfusion Services

Laboratory Alliance staffs a Rapid Response Laboratory (RRL) at each of its owner hospital sites — Crouse Hospital, St. Joseph’s Hospital Health Center and Upstate University Hospital Community Campus — in addition to operating the core laboratory in Liverpool, N.Y.

Transfusion Services are provided at each of the three hospital’s RRLs. Transfusion Services Manager Elisha George oversees more than two dozen technologists and technicians who cover three shifts at each location, providing 24/7 coverage.

Tests offered at the RRLs include: blood type (blood group and Rh test, aka ABO/Rh), antibody screen, compatibility testing (cross-match testing), antibody identification, direct antiglobulin testing (DAT, Coombs Test), blood group antigen testing (phenotyping), fetal bleed screening test, acid elutions, and antibody titrations.

In 2013, more than 170,000 tests were performed by the three hospital sites. Along with the patient testing that is performed, numerous blood components are issued. Our 2013 statistics show that 16,824 units of red cells, 4,531 plasma units and 1,709 units of platelets were issued across all sites.

In addition to the work at each of the owner hospitals, Laboratory Alliance Transfusion Services are part of a network with other hospitals that meet to share information, collaborate on issues and challenges, and develop consensus on transfusion issues that affect us all; known as the Area-Wide Blood Bank Conference. Members include the three Syracuse owner hospitals plus Upstate University Hospital, the Syracuse VA Medical Center and Oneida Healthcare.

Specialized areas of service among the owner hospital sites require Transfusion Services to have specific equipment and methodologies available. Crouse Hospital’s Neonatal Intensive Care Unit requires very specialized blood products. A special centrifuge was purchased to concentrate units of red cells to be used during intrauterine transfusions. Jim Trebbley and Nicole Rivanera, right, prepare a neonatal syringe for an exchange transfusion. Don Massey, below, attends to the receiving and dispensing window.

St. Joseph’s Hospital requires Transfusion Services to perform room temperature antibody screens and thermal amplitude testing to accommodate the decreased temperatures used during open-heart surgeries. Diane Dermody, below right, shows where inventory is stored in the St. Joseph’s RRL Blood Bank.

Our Transfusion Services also monitor and issue RH immunoglobulin products for pregnant moms who are Rh Negative. In 2013, a total of 806 doses were issued across all three sites. Teri Gillett and Terry Tirabassi, bottom right, review Transfusion Services orders and patients’ previous testing in the Laboratory Information System (L.I.S.).
Upstate University Hospital Community Campus Blood Bank staff include, front row, left to right: **Marene Ballard, Van Le, Colleen Poirier**, and back row, left to right: **Margie Grosick, Elise Bowe, Ann Sylcox, Diane Signore** and Transfusion Services Manager **Elisha George**.

Pictured center is Crouse Hospital’s Blood Bank staff, including, from left, **Don Massey, Jim Trembley**, Transfusion Services Manager **Elisha George**, **Cathy Husted** and **Nicole Rivanera**.

Below, **Elise Bowe** and **Colleen Poirier** review a request for products transfusion at our Community Campus RRL Blood Bank.

Left, St. Joseph’s Hospital Blood Bank staff include, from left: **Teri Gillett, Kaitlyn Diaferio, Ashley Barzee, Diane Dermody, Bev Carrigan, Terry Tirabassi** and Transfusion Services Manager **Elisha George**.
Toys for Tots Holiday Toy Drive
Courier Dave Hentges takes a moment to show off some of the great toys that were donated by employees during the U.S. Marine Corps Toys for Tots campaign during November and December. Collection boxes were filled with toys at our Operations Center and Corporate Offices, at each of our three hospital Rapid Response Laboratories and at our Liverpool Patient Service Center.

Salvation Army Holiday Food Drive
Coinciding with the Toys for Tots holiday drive was a food drive for the Salvation Army, and again, our employees stepped up to make the holidays more special for those in need in our community.

Homeless Shelter Emergency Clothing Drive
Laboratory Alliance’s Anne Marie Mullin and Barbara Guiffrida brought a community need to our attention in January and our employees overwhelmingly responded with donations during an emergency drive for items for people in homeless shelters. Transportation Supervisor Bill Miller, pictured, took charge of getting the boxes to United Way’s main office on James Street in Syracuse.

Go Red for Women Benefits American Heart Association
Many of our employees contributed to the American Heart Association and wore red on Feb. 6 in order to bring awareness to heart disease and healthy lifestyles. The top photo includes staff from our Corporate Office and the bottom photo was taken at our Operations Center.

Learn more at www.heart.org
Paul A. Granato, Ph.D., director of microbiology, presented his abstract “Comparison of AmpliVue GBS Assay with GeneXpert GBS Assay and Culture for Detecting Group B Streptococci in Vaginal/Rectal Specimens Following Lim Broth Enrichment” at the Association for Molecular Biology’s AMP 2014 Annual Meeting, held Nov. 13-15 outside Washington, D.C.

Also, he presented “Evaluation of the Nanosphere Verigene Enteric Pathogen Test for Detecting Important Viral and Bacterial Agents of Diarrhea” at the Association of Molecular Pathology and Human Genomics meeting on Nov. 12 in Washington, D.C.

An article that Dr. Granato co-authored with Microbiology Manager Russell A. Rawling was published in the Nov. 15 issue of Clinical Microbiology Newsletter. It is titled “Lactococcus garvieae Native Valve Endocarditis.”

Employee Anniversaries

**January, 10 Years**
- Linda Bondy
- Karen Carter

**February, 15 Years**
- Linda George

**March, 10 Years**
- Carol Smith
- Robert Sudakow

**March, 15 Years**
- Lisa Coulombe
- Ann Billion
- Ralph Dapo
- Frederick David
- Bernadette Devine
- Maya Lindstrom

**At our Corporate Office**
- Patricia Barnes – Customer Service Specialist

**At our Operations Center**
- Melanie Bergman – Phlebotomist
- Richard Burton – Laboratory Office Assistant
- Caitlin Crisafulli – Laboratory Office Assistant
- Katherine Cushman – Phlebotomist
- Anna Karczewski – Laboratory Office Assistant
- Tiffany Kolod – Histology Technical Assistant
- Megan Ormsby – Medical Laboratory Technician
- James Palozzola – Courier
- Anthony Pasco – Courier
- Adara Proulx – Laboratory Office Assistant

**At our Rapid Response Laboratory at Crouse Hospital**
- Kasey Stone – Technical Processing Assistant

**At our Rapid Response Laboratory at St. Joseph’s Hospital**
- Thomas Haskins – Laboratory Office Assistant
- Gina Magnanti – Laboratory Office Assistant
- Faith Paskell – Technical Processing Assistant

**At our Rapid Response Laboratory at Upstate University Hospital Community Campus**
- Elise Bowe – Medical Laboratory Technician

**In The News**

Paul A. Granato, Ph.D., director of microbiology, presented his abstract “Comparison of AmpliVue GBS Assay with GeneXpert GBS Assay and Culture for Detecting Group B Streptococci in Vaginal/Rectal Specimens Following Lim Broth Enrichment” at the Association for Molecular Biology’s AMP 2014 Annual Meeting, held Nov. 13-15 outside Washington, D.C.

Also, he presented “Evaluation of the Nanosphere Verigene Enteric Pathogen Test for Detecting Important Viral and Bacterial Agents of Diarrhea” at the Association of Molecular Pathology and Human Genomics meeting on Nov. 12 in Washington, D.C.

An article that Dr. Granato co-authored with Microbiology Manager Russell A. Rawling was published in the Nov. 15 issue of Clinical Microbiology Newsletter. It is titled “Lactococcus garvieae Native Valve Endocarditis.”

**New Employees**

**January, 10 Years**
- Linda Bondy
- Karen Carter

**February, 15 Years**
- Linda George

**March, 10 Years**
- Carol Smith
- Robert Sudakow

**March, 15 Years**
- Lisa Coulombe
- Ann Billion
- Ralph Dapo
- Frederick David
- Bernadette Devine
- Maya Lindstrom

**At our Corporate Office**
- Patricia Barnes – Customer Service Specialist

**At our Operations Center**
- Melanie Bergman – Phlebotomist
- Richard Burton – Laboratory Office Assistant
- Caitlin Crisafulli – Laboratory Office Assistant
- Katherine Cushman – Phlebotomist
- Anna Karczewski – Laboratory Office Assistant
- Tiffany Kolod – Histology Technical Assistant
- Megan Ormsby – Medical Laboratory Technician
- James Palozzola – Courier
- Anthony Pasco – Courier
- Adara Proulx – Laboratory Office Assistant

**At our Rapid Response Laboratory at Crouse Hospital**
- Kasey Stone – Technical Processing Assistant

**At our Rapid Response Laboratory at St. Joseph’s Hospital**
- Thomas Haskins – Laboratory Office Assistant
- Gina Magnanti – Laboratory Office Assistant
- Faith Paskell – Technical Processing Assistant

**At our Rapid Response Laboratory at Upstate University Hospital Community Campus**
- Elise Bowe – Medical Laboratory Technician

Dr. O’Leary Discusses Leadership In Post-Standard, Syracuse.com Article

Dr. Michael O’Leary on leading: Your workforce is your greatest asset, take care of your greatest asset

Stan Linhorst, director of publications for Syracuse Media Group: Print, Web, Mobile, which includes The Post-Standard, interviewed Dr. O’Leary on Jan. 19 for his “Sunday Conversation” column published Feb. 15. The “Sunday Conversation” explores topics in leadership, success and innovation that teach, encourage and inspire our community.

The article is available online at Syracuse.com.
Join Our Team as We Remember a Friend

Laboratory Alliance will be participating as a team in the 2015 American Heart Association Heart Walk. Our team will again walk or run in memory of Barb Gonnella, a colleague and advocate for a healthy lifestyle, who passed away in 2013. The event will be held on Saturday, March 28, at 10 a.m., rain or shine, at Onondaga Community College’s SRC Event Center. Registration begins at 8 a.m.

Following are instructions to join the Laboratory Alliance Team:
1. Go to www.heartwalk.kintera.org/syracuse
2. Click on “Register”
3. Agree to the Waiver/Agreement
4. Click on “Join a Team”
5. Type in “Laboratory Alliance of Central New York, LLC” and click “Search”
6. Choose “Laboratory Alliance of CNY, LLC (In memory of Barb Gonnella)”
7. Click on “Join Our Team”
8. Agree to the Waiver/Agreement, again
9. Create username (can be your name) and create password
10. Follow the prompts to conclusion

The funds raised for the Heart Walk will support heart research and help to provide life-saving information to those who need it most. Our goal this year is to surpass the $5,200 we raised last year. The donations collected from our Go Red Jean Day Campaign on Feb. 6 will count towards the Heart Walk goal.

For more information or if you would like to contribute to the team, contact Marsha Herbst at 461-5903 or by email at marshaherbst@lacny.com or Sunquest mailbox (MYH).

The East Syracuse Patient Service Center Building Renamed Crouse Medical Center

Brittonfield Medical Center in East Syracuse, where Laboratory Alliance operates a patient service center, has been renamed Crouse Medical Center.

In addition to Laboratory Alliance’s patient service center, the building located at 5000 Brittonfield Parkway is home to offices affiliated with Crouse Hospital.

Laboratory Alliance’s patient service center is in Suite A108, on the first floor behind the atrium, at the end of the hall. It is open from 8 a.m. to 4:30 p.m. Monday through Friday, and closed for lunch from 12:15 to 1 p.m. Brittonfield Parkway connects to both Collamer (Rt. 298) and Fly Roads and is adjacent to Route 481 and the New York State Thruway exit 34A. Free parking is located in front of the building and is handicap accessible.

Appointments are not necessary and most medical insurance plans are accepted by Laboratory Alliance. Experienced professional phlebotomists are always on hand and the company's couriers transport lab specimens to the main laboratory located in Liverpool.

For more information, including a list of patient service centers, directions, maps and laboratory test menu, visit laboratoryalliance.com or call the Customer Service Department at 315-461-3008.

Calendar of Events

Saturday, March 28
American Heart Association Heart Walk, SRC Arena at OCC. Laboratory Alliance will sponsor a team to walk in memory of Barb Gonnella. Contact Marsha Herbst at 461-5903 or by email at marshaherbst@lacny.com to register.

Saturday, March 21
Ignite 2015 Catholic Men’s Conference, SRC Arena at OCC. Laboratory Alliance is a corporate sponsor and an exhibitor.

April 19-25
National Medical Laboratory Professionals Week. The theme is “Laboratory Professionals Get Results.”

The good ol’ days may have left their mark

Baby boomers — those born from 1946 to 1965 — have the highest rate of the hepatitis C virus.

Undetected, the hepatitis c virus can lead to liver disease and liver cancer. Early diagnosis can lower the risk of damage.

Ask your doctor for the simple blood test today.
Learn more at laboratoryalliance.com