

PLMS Discipline Committees

Newsletter

The purpose of this quarterly newsletter is to provide Laboratory Operations with updates from the PLMS Discipline Committees



Biochemistry

- Katie Monai
- Dr. Michael Chen



Hematology

- Lorraine Liu
- Dr. Nadia Medvedev



Medical Microbiology

- Hope Byrne
- Dr. David Goldfarb



Transfusion Medicine

- Kristin Rosinski
- Dr. Doug Morrison



Anatomical Pathology

- Brigette Rabel
- Dr. Lik Hang Lee



Genetics Genomics

- May He
- Medical Lead (Vacant)

Biochemistry

Vitamin D Reference Range Standardization

- Standardized reference ranges and result comments were established across the province to improve consistency of results and align with the BC Guideline. Implementation in underway.

Medical Peer Review

- Two medical peer review sessions have been completed and shared with the BC Association of Laboratory Physicians, including MBAC members. The cases are prepared by peers highlighting interesting lab cases to foster continuing education in biochemistry.

Partnership with BC Renal

- Working with BC Renal to target key initiatives impacting renal patients and clinicians such as critical results processes and home dialysis water sample shipping.

Utilization/Sustainability

- Lipoprotein (a) fee code was amended to make it consistent with the BC Guideline as a once in a lifetime funded test.

*The **PLMS Advisory Committees** have medical, technical and operational representation from all health authorities, the PLMS and the MoH.*

*The **Committees** were created to support the implementation of the provincial mandate of Provincial Laboratory Medicine Services (PLMS), which is to ensure that clinical laboratory diagnostics are quality driven, achieve excellent clinical outcomes, and remain sustainable by being provided effectively and efficiently.*

*The **Committees** work with PLMS, the Health Authorities, private laboratory partners, and the Ministry of Health (MoH), by providing discipline specific clinical, technical, and operational leadership; and providing advice/expertise on provincial guidelines, policies, and discipline strategic planning.*

*The **Committees** will provide advice and guidance, will foster engagement and act as change management champions for discipline specific quality improvement, innovation and optimization opportunities.*

*The **Committee** objectives will align with the PLMS purpose to lead innovative, high quality laboratory services that improve the health of B.C. citizens by helping providers and citizens make timely and insightful decisions regarding patient care.*

ANA/ENA Guideline Revision – Joint Initiative with Hematology

- Biochemistry and Hematology advisory committees supported the revision and implementation of the BC Guideline. The MSP fee schedule was updated to support easier access to testing for patients who are pregnant or seeking pregnancy with connective tissue disease.

Hematology

Acquire Hemophilia A Recommendation Updates

Recognizing the complexity in patient management in consultation with clinical hematopathologists, the committee agreed to include new language to advocate for reflex testing of vWD/AvWS and lupus anticoagulant in newly diagnosed AHA patients. The committee recognizes that even though most cases of AHA are straight forward to diagnose, there is a risk of misdiagnosis if the above are not carried out. The following language was appended to the original recommendation, published in 2023:

“In cases of suspected AHA, von Willebrand (antigen and functional) and lupus anticoagulant testing should be carried out, in addition to the standard assays routinely used to diagnose AHA.”

- Please contact Lorraine Liu (Lorraine.liu@phsa.ca) to obtain the newest version of the AHA recommendation (September 2024).

Flow Cytometry Education & Training

A set of 6 standardized Flow Cytometry technologist training modules is in development, with both technical and medical contribution.

- First three modules are now live in LearningHub as *Introduction to Flow Cytometry* lesson. Interested parties can contact Lorraine Liu (Lorraine.liu@phsa.ca) for registration.
- Final three modules (Compensation, Gating strategies and Q₁QC) drafts are completed, and work is underway to create corresponding lessons in LearningHub.

BM Synoptic Reporting Initiative

Synoptic reporting for BM case may offer opportunities to improve accuracy and completeness of relevant data. PHAC is developing strategies to develop evidence-based recommendations to standardize the basic components of a synoptic report template for bone marrow samples. A framework for bone marrow synoptic reporting will likely improve completeness of the final report in a manner that is clear, succinct, and consistent among different facilities.

- Working group commenced November 2024. Work in progress.

Hereditary Thrombophilia

Utilization management of hereditary thrombophilia laboratory testing is being explored through the use of a test request form at health authority levels. PHAC is helping members to discover more efficient ways to communicate appropriate testing behaviors, potentially through the creation of testing recommendations or proposal to create a GPAC guideline. Discussion ongoing.

ANA/ENA Guideline Revision – Joint Initiative with Biochemistry

For details, please see section above.

Medical Microbiology

CJD Memo

On July 24, The Public Health Agency of Canada published updated recommendations entitled '[Recommendations for Laboratory Handling of Low-Risk Specimens, including Cerebrospinal fluid, from Patients under Investigation for Creutzfeldt-Jakob Disease](#)'. The BCCDC PHL in collaboration with the Provincial Microbiology Advisory Committee (PMAC), the Medical Biochemistry Advisor Committee (MBAC), and the Provincial Hematopathology Advisory Committee endorses these updated recommendations.

Cryptococcal Antigen Lateral Flow Assay (CrAg LFA)

Provincial collaboration between PMAC participants and BCCDC to validate the CrAg LFA by FungiXpert is nearing completion. This work included a comparison study to evaluate the performance of the Health Canada approved FungiXpert assay against the IMMY CrAg LFA, which is only available through the Health Canada Special Access Program. The finalized report should be available in January 2025.

Transfusion Medicine

Sunsetting of PHAC Programs

In September, the Public Health Agency of Canada (PHAC) announced that the Blood Safety Contribution Program, which funds the Transfusion Transmitted Injuries Surveillance System (TTISS) and Transfusion Error Surveillance System (TESS), will conclude operations on March 31, 2026

- This decision was made as the result of a [formal program evaluation](#) which cited several deficiencies.
- Nationally all provinces have expressed concern regarding the impact this will have and have reiterated the importance the need for a National Hemovigilance system
- Discussions are underway with respect to a future structure
- There is no change to Health Canada's role or the Canada Vigilance Program
- Please continue to report transfusion reactions, as per existing process, to PBCO

Provincial Redistribution Program

The PBCO has managed a provincial redistribution for red cells and factor products for over 2 decades, to reduce product wastage of our scarce resources. Since 1999 the Central Transfusion Registry (CTR) has been the source of disposition data for all blood components and products in the province. When these programs were initially established product movement was primarily across Health Authority boundaries. With time, regional redistribution became more common, where movement does not cross a Health Authority boundary. These changes in redistribution patterns, combined with LIS changes have resulted in incomplete and inaccurate information being captured in CTR. Over the coming weeks, PBCO team will be reaching out to explore the current data being received as part of the monthly disposition report to CTR. We hope to receive support from all regions, and look forward to exploring the feasibility of capturing all movement in the CTR as efficiently as possible.

PBCO / CBS 25th Annual Education Day

This year's PBCO/CBS Education Day took place on Friday, Sept 27th, at the Executive Plaza Hotel Coquitlam. For those who couldn't join us, Presentation slides and recordings are now available on the [PBCO website](#).

Year-End Data Presentation

The 2023/24 year-end data presentation was presented to and shared with members of the Transfusion Medicine Advisory Group (TMAG), the Technical Resource Group (TRG), and the Nursing Resource Group (NRG) in October.

Immunoglobulin (Ig) Utilization – High & Chronic Neurology Users Project

- The PBCO Ig Neurology Panel relaunched the High & Chronic project in 2023; the project reviews utilization of high & chronic users of Ig for the “approved” neurology conditions: Myasthenia Gravis, Multifocal Motor Neuropathy, Chronic Inflammatory Demyelinating Polyneuropathy, and Guillain Barre Syndrome
- For the 2022/23 year; 83 high users reviewed:
 - Recommendations sent to ordering physician / neurologist regarding further treatment of these patients
 - Medical directors, technical leads and utilization management coordinators have received letters regarding patient reviews
- For the 2023/24 year; 176 patients established as chronic users for review:
 - First cohort: 44 chronic Myasthenia Gravis patients

Anatomical Pathology

The [Path Hub](#)

Cancer treatment is continually evolving, with many therapies depending on the results of AP biomarker and genomic testing. However, some pathologists in BC are unaware of the tests required by oncologists, leading to late orders and delays in treatment. While subspecialist pathologists at major centers are up to date on testing requirements, there is a communication gap with pathologists in community hospitals across BC.

To address this issue, the Provincial AP Advisory Committee created an online hub with tumour-specific testing guidelines. The [Path Hub](#) provides pathologists across the province with easy access to the latest testing guidelines for various tumour types. The guidelines are developed by the Special Interest Groups (SIG's) in consultation with oncologists and tumour groups.

The [Path Hub](#) also hosts other resources for AP staff and pathologists, including a Provincial IHC List. The IHC List shows which tests, clones and platforms are used at AP labs across BC. This is meant to be a resource for staff setting up, troubleshooting, or referring IHC testing.

Genetics/Genomics

MSP Schedule

Extend the provisional (P) status of fee item P93047 – Immunoglobulin heavy chain variable region somatic hyper-mutational status (IGHV-MA) to June 30, 2025.

BC Cancer Cancer Genomics Testing Strategic Plan

Timely and advanced genomic testing means patients get a specific cancer diagnosis, receive targeted treatments, reduce unnecessary testing, and/or expedite their time to treatment. Real-time genetic and genomic testing will also improve equitable access to precision oncology care and enable investigators to advance clinical research programs. The 10-year Cancer Action Plan for BC identified the priority 1.34 to

plan and implement a tumour-first genomics strategy leading to universal genomics testing for patients with cancer.

PLMS is a key system partner supporting the 10-year Cancer Action Plan initiatives. PGAC held several Cancer Genomics testing themed discussions this year. Most recently Dr. Alex Wyatt, Scientific Director for the Cancer Genetics and Genomics lab at BC Cancer, presented the BC Cancer led project that aims to create an integrated strategic plan to improve access to precision oncology as standard of care and advance research.

Current State of BC Publicly Funded Genetics and Genomics Testing

PLMS has updated an inventory of publicly funded genetic & genomic testing and will sustain a comprehensive inventory of the testing capability across the province. The information will be used to support system understanding in the effort to advance the province's genetic and genomic testing.

