

Tennessee Medical Laboratory Board
July 28, 2021
Full Board Meeting
Minutes

Meeting Date: July 28, 2021

Time: 9:04 AM CDT

Location: Tennessee Department of Health
Division of Health Licensure and Regulations
Metro Center Complex, Poplar Room, Ground Floor
665 Mainstream Drive
Nashville, TN 37243

Members Present:

Michael Johnson, MT-Med.Technologist Generalist/Chair
Jerry Barker, MT-Hospital Laboratory Mger/Admin. Dir.
LeeAnne Briggs, MT- Med. Technologist, Educator
Carla M. Davis, MD-Pathologist
Danielle Gibson, MD-Pathologist, Non-Educator
Jennifer Gidcomb, MT-Medical Technologist, General
Matthew Hardison, PhD, Independent Lab Mger/Adm.
Gaye G. Jolly, MT-Hospital Administrator
Andrew Stanton, CT-Cytotechnologist
James A. Vaughn, MD-Pathologist Educator

Vacant Positions: Non-Pathologist Physician
Medical Technologist Supervisor

Members Absent: Lynn Stewart, Citizen Representative

Staff Present: Sandra S. Bogard, MT Consultant, Director
Nina V. Smith, MT Consultant Administrative Office
Kyonzte Hughes-Toombs, Deputy General OGC
Mark Cole, Senior Associate Counsel
Fowlen Anders, MT Consultant/Supervisor ETRO
Lori Reynolds, MT Consultant/Surveyor ETRO
Debbie Haggard, MT Consultant/Supervisor WTRO
Richie Scruggs, MT Consultant/Surveyor WTRO
Susan Wilson, MT Consultant/Supervisor MTRO
Susan Massey, MT Consultant/Surveyor MTRO

Staff Absent: All were present.

CLIA Manager/Representative: Richard Carroll, CLIA Manager was absent.

Introduction of Board Members: Board members and staff made their introductions to the audience.

Quorum:

Ten (10) board members were present which constitute a quorum.

Call To Order:

The meeting was called to order at 9:05 am CST by Mr. Michael Johnson the Board Chairman.

Presiding Officer:

The meeting was conducted by Mr. Johnson.

Recognized New Board Members

The Board Chairman recognized the following new Board members:
Jerry Barker, MT-Hospital Laboratory Mger/Admin. Dir.
Jennifer Gidcomb, MT-Medical Technologist, General
Matthew Hardison, PhD, Independent Lab Mger/Adm.
Andrew Stanton, CT-Cytotechnologist

Approve Minutes:

P & E Committee Meeting

A motion to approve the April 28, 2021 Personnel & Education Committee minutes was made by Dr. Gibson.
Second: Ms. Briggs

The minutes were approved.

Full Board Meeting

A motion to approve the April 29, 2021 Board minutes was made by Ms. Jolly.
Second: Dr. Davis

The Board minutes were approved.

Ratification Of Initial Determinations
P & E Committee Meeting:

Ms. Briggs reported the actions of the Personnel & Education Committee meeting, July 27, 2021.

Motion to ratify Committee actions: Dr. Vaughn
Second: Dr. Gibson

The report was accepted as presented by Ms. Briggs.

Contested Cases:

No contested cases were presented during this meeting.

Consent, Agreed, Compliance Orders, And Letters of Reprimand:

No consent, agreed, or compliance orders were presented during this meeting. No letters of reprimand were presented.

Presentations To The Board:

**Tennessee Professional Peer
Assistance Program (TNPAP)
Teresa Phillips, Executive
Director**

The statistical report for July 1, 2020-June 30, 2021 was presented by Ms. Teresa Phillips, Executive Director.

Zero (0) individuals were monitored during this period.

Motion to accept the TNPAP report: Ms. Briggs
Second: Dr. Gibson

The report was accepted as given.

Note: Review of TNPAP materials via the internet counts as clock hours toward continuing education credits.

A certificate of completion documenting the review of these materials can be completed at the end of the session. Internet site: www.TNPAP.org

**Investigations Report
Lori L. Leonard
Disciplinary Coordinator**

Ms. Leonard's investigative report included the following:

Monitored Practitioners (Personnel and Facilities):
(2021)

Investigative Licensed Laboratory Personnel: (2021)
Zero new complaints.

One (1) complaint closed.

Two (2) currently open complaints.

Seven (7) currently monitored practitioners:
two under board order.
four suspended licenses.
one expired license.

Investigative Licensed Laboratory Facilities: (2021)
Five (5) new complaints:
one for unqualified personnel.
two for unprofessional conduct.
one for diagnostic discrepancy.
one for unlicensed practice.

Two (2) complaints closed.

Motion to Accept Report: Dr. Gibson
Second: Dr. Vaughn

The investigations report was accepted as given.

Financial Report

Matthew McSpadden
Fiscal Manager

A financial report was not presented at this meeting.

Legislative Update

Elizabeth E. Foy, Esq.
Legislative Liaison

Elizabeth E. Foy, Esq. Legislative Liaison presented the following legislative update:

[Public Chapter 37](#)

This act prohibits agencies subject to sunset review from promulgating rules or adopting policies to exempt members solely by virtue of their status as members. This act took effect March 23, 2021.

[Public Chapter 242](#)

This act authorizes records custodians to petition a court for injunctive relief from individuals making frequent public records requests with the intent of disrupting government operations, following a fifth (5th) public records request. A records custodian can only petition a court if they notify the person in writing stating the specific conduct may constitute intent to disrupt government operations, and that the person continues to do so. The individual upon a court injunction would not be able to make public requests at the agency for up to one (1) year.

This chapter took effect April 28th, 2021 and will sunset July 1, 2025.

[Public Chapter 291](#)

This act requires the attorney general and reporter to not approve an emergency rule if the emergency rule does not meet the statutory criteria for adoption of the rule.

This act took effect July 1, 2021.

[Public Chapter 328](#)

This act requires that starting December 1, 2023, state agencies submit a report of their effective rules to the chairs of the government operations committee every eight (8) years. The report is required to include a brief description of the department's operations that each chapter affects, as well as each rule and its administrative history, which would include the original promulgated date and the dates the rule was last amended, if applicable. Additionally, the report would include a determination of each rule on whether it is adheres to current state or federal law or court rulings, should be amended or repealed, reviewed further, or continue in effect without amendment. Lastly, if there

are any intentionally false statements in the report, the government operations committee would have the ability to vote to request the general assembly to remove a rule or suspend the department's rulemaking authority for any reasonable period of time. This act took effect July 1, 2021.

Public Chapter 348

This act requires fetal remains from a surgical abortion to be disposed of solely by burial or cremation. Under this act, an abortion facility is defined as any ASTC, private office, or other facility as defined by TCA 68-11-201 in which abortions are induced or performed. The act does not include hospitals licensed under Title 68 as long as the hospital policies and regulations concerning disposal of fetal remains substantially complies with the requirements of this act. A pregnant woman who has a surgical abortion has the right to choose burial or cremation of the fetal remains as well as the location for the final disposition. The woman is to be provided with forms created by the Department of Health informing her of that right and selecting the means and location. If the woman does not wish to exercise this right, the abortion facility shall determine whether disposition is by cremation or interment. The act also establishes a variety of record keeping requirements on the facility. This act took effect on May 6, 2021 for rulemaking purposes. The rest of the public chapter takes effect July 1, 2021.

Public Chapter 453

This act requires public or private entities or businesses that operate a building open to the general public to post signage regarding public restroom access in certain situations. Specifically, this applies to entities or businesses that have restroom policies allowing either biological sex to use any public restroom within their building. The act includes requirements for language, size, location, and even color for the signage. The act excludes unisex, single occupant restrooms or family restrooms intended for use by either sex. This act took effect July 1, 2021.

Public Chapter 495

This act authorizes additional exemptions to the original list of licensure requirements from the Tennessee Medical Laboratory Act. They include Tennessee licensed pharmacies that possess an active CLIA Waiver, as well as medical personnel who are employed and

perform testing at a licensed private medical laboratory – including hospital-based laboratories – notwithstanding existing laws on examining and reporting of human specimens, or the soliciting of their practice. The act also authorizes directors of medical laboratories to monitor their personnel remotely. This act took effect May 25, 2021.

Public Chapter 513

This act prohibits the Governor from issuing an executive order and a state agency, department or political subdivision from promulgating, adopting, or enforcing an ordinance or resolution that requires a person to receive an immunization, vaccination, or injection for the SARS-CoV-2 virus or any variant of the SARS-CoV-2 virus. It also deletes the previous override during an epidemic or immediate threat of an epidemic of an objection against vaccination that was made on the basis of religious tenets. The law prohibits requiring the COVID-19 vaccine to attend k-12 schools. The prohibition against requiring vaccines does not apply to governmental entities subject to federal or state statute or rule that prohibits the entity from requiring medical treatment for those who object on religious grounds or right of conscience. The law also does not apply to students of a public institution of higher education delivering healthcare services when the student is participating in/fulfilling requirements of a program in medicine, dentistry, pharmacy, or another healthcare profession.

This act took effect May 25, 2021.

Public Chapter 531

This act limits an agency's authority to promulgate rules without a public hearing. There are exceptions to the public hearing requirement. These exceptions include emergency rules, rules that are nonsubstantive modifications to existing rules (like clerical updates), rules that repeal existing rule, or rules that eliminate or reduce a fee described by an existing rule.

This act took effect July 1, 2021.

Public Chapter 532

This act authorizes the joint government operations committee to stay an agency's rule from going into effect for a period of time not to exceed ninety (90) days. If the government operations committee determines that subsequent stays are necessary, then

the joint committee may issue consecutive stays, each for an additional ninety (90) day period, so long as such stays do not extend beyond the fifth legislative day of the year following the year in which the rule is filed with the secretary of state. The initial stay may be done by either the house or senate government operations committee, but subsequent stays must be by agreement by the committees of both chambers. A stay is effective when the respective committee files written notice with the secretary of state, and the respective committee shall specify the length of effectiveness of the stay. This act took effect May 25, 2021.

****These are general summaries of legislation. For more detailed information and all specifics/requirements, please review the links to each public chapter****

Point of Care Exemptions 1200-06-03-.16(1):

1. Bristol Regional Medical Center Point-of-Care

1 Medical Park Boulevard, Suite G50
Bristol, TN 37620
Christina Hurt, MLT(ASCP)-Point-of-Care
Coordinator

The request was to permit Certified Registered Nurse Anesthetists, Registered Nurses, Perfusionists, and Registered Cardiovascular Invasive Specialists to perform hematocrit, sodium, potassium, chloride, hemoglobin, pH, pO₂, pCO₂, ionized magnesium, ionized calcium, glucose, lactate, and O₂Hg testing in the Cardiovascular Operating Rooms/CVOR, and Cath Lab utilizing the Nova Stat Prime Plus instrument and methodology.

Motion: Dr. Vaughn
Second: Ms. Briggs

The exemption request was approved.

2. Johnson City Medical Center

400 North State of Franklin Road
Johnson City, TN 37604
Catherine Greear, MT-Point-of-Care
Coordinator

The request to permit Certified Registered Nurse Anesthetists, Perfusionists, Certified Cath Lab Techs, Registered Nurses, Certified Licensed Practical Nurses, and Anesthesiologists to perform sodium, potassium, chloride, TCO₂, glucose, ionized magnesium, ionized calcium, lactate, hematocrit, hemoglobin, pH, pCO₂, pO₂, and O₂Hg testing in the Cath Lab, Cardiac Intensive Care (2600), and perioperative Services (SS/Holding, Main Operating Room, & Coronary Operating Room) utilizing the Nova Stat Prime Plus instrument and methodology.

Motion: Dr. Gibson
Second: Dr. Davis

- 3. Holston Valley Medical Center Point-of-Care**
130 West Ravine Road
Kingsport, TN 37660
LaDonna Compton, MT(ASCP) – Lead Point-of-Care Coordinator

The exemption request was approved.

The request was to permit Certified Registered Nurse Anesthetists, Perfusionists, Radiology Technologists, Registered Cardiovascular Invasive Specialists, and Registered Nurses, to perform sodium, potassium, chloride, TCO₂, glucose, ionized magnesium, ionized calcium, lactate, hematocrit, hemoglobin, pH, pCO₂, pO₂, sO₂, and O₂Hg testing in the Cardiovascular Operating Room, Cardiovascular Intensive Care Unit, Cardiovascular Catheterization Lab, and Cardiovascular Post Anesthesia Care Unit utilizing the Nova Stat Prime Plus instrument and methodology.

Motion: Ms. Briggs
Second: Mr. Barker

The exemption request was approved.

- 4. West Tennessee Healthcare-North Hospital**
367 Hospital Boulevard
Jackson, TN 38305
Shelia Boswell, MT - Point of Care Coordinator

The request was to permit Certified Registered Nurse Anesthetists to perform blood gases, sodium, potassium, ionized calcium, and hematocrit testing facility-wide utilizing the Abbott i-STAT (EG7+ cartridge) instrument and methodology.

Motion: Dr. Vaughn
Second: Dr. Gibson
Abstain: Mr. Barker

The exemption request was approved.

- 5. TriStar Horizon Medical Center**
111 Highway 70 East
Dickson, TN 37055
Sheri Sutton-Administrative Director

The request was to permit Registered Nurses and Respiratory Therapists to perform pH, pCO₂, pO₂, HCO₃, TCO₂, SO₂, and BE testing facility-wide utilizing the Siemens EPOC instrument and methodology.

Motion: Ms. Briggs
Second: Dr. Davis
Abstain: Dr. Gibson

The exemption request was approved.

- 6. LabPlus, LLC - Saint Thomas Midtown**
2000 Church Street
Nashville, TN 37203
G. Russell Ashley, MLS(ASCP)^{cm} – Point-of-Care

The request was to permit Registered Nurses to perform ionized calcium testing facility-wide utilizing the Abbott i-STAT instrument and methodology.

Motion: Ms. Briggs
Second: Ms. Gidcomb

- 7. LabPlus, LLC - Saint Thomas West**
4220 Harding Pike
Nashville, TN 37205
G. Russell Ashley, MLS(ASCP)cm-Point-of-Care

The exemption request was approved.

The request was to permit Registered Nurses, Cardiovascular Technologists, Registered Cardiovascular Invasive Specialists, and Radiologic Technologists to perform hematocrit, hemoglobin, oxyhemoglobin, and carboxyhemoglobin testing in the Cardiac Cath Lab utilizing the Nova Stat Prime Plus instrument and methodology.

Motion: Dr. Vaughn
Second: Dr. Gibson

The exemption request was approved.

The second request was to permit Pharmacists to perform PT/INR testing in the Anticoagulation Monitoring Clinic utilizing the Abbott i-STAT instrument and methodology.

Motion: Ms. Briggs
Second: Dr. Vaughn

The exemption request was approved.

- 8. LabPlus, LLC – Saint Thomas Rutherford**
1700 Medical Center Parkway
Murfreesboro, TN 37118
Teri Reed, MT – Lab Manager

The request was to permit Certified Registered Nurse Anesthetist, Registered Nurses, and Respiratory Therapists (ABG endorsed) to perform lactate facility-wide utilizing the Abbott i-STAT (CG4+ cartridge) instrument and methodology.

Motion: Dr. Gibson
Second: Ms. Briggs

The exemption request was approved.

The second request was to permit Registered Nurses and Licensed Practical Nurses to perform Troponin and BNP testing in the Emergency Department utilizing the Abbott i-STAT instrument and methodology.

After the Board discussion, it was decided to table this exemption request until the October Board meeting.

The following additional information needs to be submitted by the facility:

- Correlation studies
- Troponin panic values
- BNP procedure

- Procedure on how patients are handled through the emergency room (workflow).

Direct More Than Three (3) Labs 1200-06-03-.13(5):

Elizabeth E. Culler, MD
Chattanooga, TN

Dr. Culler appeared before the Board to request approval to director more than three (3) laboratories.

The labs that she requested the exemption for include:

- **Blood Assurance, Inc.-705 E. 4th Street, Chattanooga, TN 37403 (lic. # 2274)**
high complex testing
- **Blood Assurance, Inc.-2855 Keith Street, NW, Cleveland, TN 37312 (lic. # 2159)**
waived testing
- **Blood Assurance, Inc.-5425 Highway 153, Hixson, TN 37343 (lic. # 3342)**
waived testing
- **Blood Assurance, Inc.-1740 Gunbarrel Road, Chattanooga, TN 37421 (lic. # 4017)**
waived testing
- **Blood Assurance, Inc.-155 W. Broad Street, Cookeville, TN 38501 (lic. # 4070)**
waived testing
- **Blood Assurance, Inc.-604 N. Jackson Street, Tullahoma, TN 37388 (lic. # 4093)**
waived testing
- **Blood Assurance, Inc.-1412 Trotman Ave., Suite 69, Columbia, TN 38401 (lic. # 4339)**
waived testing
- **Blood Assurance, Inc.-1767 Wilma Rudolph Blvd., Clarksville, TN 37040 (lic. # pending)**
waived testing

The Board recommended that the documentation of monthly visits must continue, at all locations, regardless if the oversight is in person or remote.

The Board also indicated that the Administrative Office can approve interim plans for director oversight of greater than three (3) labs for the short term between board meetings.

Motion: Dr. Gibson
Second: Dr. Hardison

The request was approved.

Discuss, Review, And Take Action, if Needed:

Discuss Toxicology Validity Testing

During the October 17, 2002 Board meeting, it was determined that the specific gravity of urine for the purposes of determining specimen validity is not a medical laboratory test.

During the October 18, 2018 meeting, the Board suggested a disclaimer be placed on the final lab report stating the creatinine analysis is provided solely for urine specimen validation purposes. They also determined that with the disclaimer, on an esoteric laboratory final report, it is not necessary for them to obtain an additional clinical lab license.

After discussion, the Board agreed with the previous determinations. They expanded the tests used for specimen validity testing to include creatinine, pH, and specific gravity.

No motion was needed.

Task Force Recommendations Regarding Digital Imaging and Remote Work

The Task Force meeting occurred on July 27, 2021. The recommendations are currently being reviewed by the Task Force members. The Board discussion was postponed until the October Board meeting.

No motion was needed.

Discuss Supervisor Qualifications for Arterial Blood Gas Lab

The Board discussed their current regulations regarding the requirements for arterial blood gas lab supervision. They requested input from the Respiratory Care Board concerning their regulatory requirements regarding the appropriate personnel to supervise an arterial blood gas laboratory.

Further discussion will take place at the October meeting.

Motion: Dr. Davis

Second: Ms. Briggs

The motion was approved.

Discuss Use of Expired COVID-19 Test Kits, Reagents, and Collection Swabs

After discussion, the Board adopted the CMS (Centers for Medicare and Medicaid Services) and CAP (College of

American Pathologists) policy regarding the use of expired COVID-19 test kits, reagents, and collection swabs.

The policy states, “The CMS and the CAP allows laboratories to use expired COVID-19 test kits, reagents, and swabs during the public health emergency. If this use deviates from the manufacturer’s instructions, the use would not be authorized under the EUA (Emergency Use Authorization). The laboratory or testing site may use expired supplies until in-date supplies become available provided:

- There is a written policy in place to ensure the reagents are performing as expected **and**
- The kits and reagents pass quality control tests for **each** assay run.

This exception applies to reagents, kits, and swabs used in COVID-19 testing **only**. Laboratories may not adopt policies that would allow for regular use of expired reagents.”

Also, the Board discussed that labs need to document the lack of supplies. It was also determined that multiplex test kits can only report the expired COVID-19 result and not the other analytes.

Motion: Ms. Briggs
Second: Dr. Vaughn
Abstain: Dr. Hardison

The motion was approved.

Discuss Sodium Citrate Tube Shortage

The Board discussed the shortage of sodium citrate tubes. The CDC (The Centers for Disease Control and Prevention) guidance was also reviewed.

CDC recommends the following conservation strategies:

- Do not use sodium citrate tubes unless medically necessary.
- Do not include sodium citrate tubes in routine collections of a variety of specimens at the time of other blood sampling or IV insertion.
- Do not use sodium citrate tubes as discard tubes; consider clear top or red stopper tubes as an alternative.

Proficiency Testing, Validation, and
Correlation Guidance for Waived Testing

- Limit allocation of 1.8 mL sodium citrate tubes for difficult blood collections.

No motion was needed.

After Board discussion the following guidelines were adopted for waived testing:

Proficiency Testing (PT)-

- The lab must verify the accuracy of waived testing twice a year.
OR
- Enroll with a PT provider.

The performance of PT can be rotated among the different waived test systems/instruments every six (6) months.

Verification Studies-

- Each analyte must perform acceptably during verification studies/validation prior to being put into use for patient testing.
- Verification study requirements are the same for all testing regardless of complexity level.

Correlation Studies-

These studies are burdensome for waived testing and not necessary.

A policy statement, regarding waived testing, will be issued by the Board at the October meeting.

Motion: Dr. Gibson

Second: Dr. Davis

The motion was approved.

**Review And Discuss The Licensure Of Medical
Laboratory Directors:**

1. Deborah Payne, PhD
Nashville, TN 37211
Director: Molecular Diagnostics &
Microbiology

Dr. Payne received her B.A. degree in Microbiology and Immunology at the University of Texas in Austin in 1985.

She received her Ph.D. in Microbiology from the University of Texas Medical Branch at Galveston in 1993.

Dr. Payne is certified by the American Board of Clinical Chemistry (ABCC) in Molecular Diagnostics through Dec.

31, 2021. She is also certified by the American Board of Medical Microbiology (ABMM) through Dec. 31, 2022.

She received her postdoctoral fellowship training at the University of Texas Medical Branch at Galveston from 1993-1997.

Dr. Payne is seeking licensure as a Director of Molecular Diagnostics & Microbiology.

Motion: Ms. Jolly

Second: Dr. Vaughn

The license was approved.

2. David Robbins, PhD
New Orleans, LA 70119
Director: Molecular Diagnostics

Dr. Robbins received his B.A. degree in Chemistry at John Hopkins University in Baltimore, MD in 1978.

He received his Ph.D. in Biochemistry from the University of Texas in Austin, TX in 1983.

Dr. Robbins is certified by the American Board of Clinical Chemistry (ABCC) in Molecular Diagnostics through Dec. 31, 2021.

He received his postdoctoral fellowship training at the University of Kentucky in Lexington, KY from 1983-1988.

Dr. Robbins is seeking licensure as a Director of Molecular Diagnostics.

Motion: Dr. Gibson

Second: Ms. Gidcomb

The license was approved.

Presiding Officer

The gavel was handed over to Ms. Jolly to preside over the Board meeting when the chairman, Mr. Johnson, left the meeting.

3. Betsy Bove, PhD
Wilmington, DE 149804
Director: Molecular Diagnostics

Dr. Bove received her B.A. degree in Biological Sciences at the University of Delaware in Newark, DE in 1978.

She received her Ph.D. in Genetics & Molecular Biology from the University of Delaware in Newark, DE in 1996.

Dr. Bove is certified by the American Board of Bioanalysis (ABB) in HCLD Molecular Diagnostics through Dec. 31, 2021.

She received her postdoctoral fellowship training at Fox Chase Cancer Center in Philadelphia, PA from 1996-2002.

Dr. Bove is seeking licensure as a Director of Molecular Diagnostics.

Motion: Dr. Vaughn
Second: Dr. Hardison

The license was approved.

4. Natalie Whitfield, PhD
Oceanside, CA 92056
Director: Microbiology

Dr. Whitfield received her B.A. degree in Biological Sciences at the University of Texas in El Paso in 2001.

She received her Ph.D. in Cellular and Molecular Biology from the University of Michigan in Ann Arbor, MI in 2009.

Dr. Whitfield is certified by the American Board of Medical Microbiology (ABMM) through Dec. 31, 2021.

She received her training in Clinical and Molecular Microbiology as a Division Manager at the University of Arizona Medical Center in Tucson, AZ from 2010-2013.

Dr. Whitfield is seeking licensure as a Director of Microbiology.

Motion: Dr. Gibson
Second: Dr. Davis

The license was approved.

Reports/Requests:

Board Director's Report

Sandra Bogard, MS, MT(ASCP) QLC ^{cm}

The report included statistical data concerning the licensure of laboratory personnel, facilities, training programs licensure, and health fair/health screening events during the third quarter.

The website continues to be updated daily/or as needed.

Staffing updates:

- New West TN Surveyor, Richie Scruggs, started on June 23, 2021.

Board meeting dates for 2021 were presented.

Four (4) new Board Appointments:

- Hospital Laboratory Manager-Mr. Jerry Barker
- Independent Laboratory Manager-Dr. Matthew Hardison
- Cytotechnologist-Mr. Andrew Stanton
- Medical Technologist-Ms. Jennifer Gidcomb

Two (2) Vacancies on the Board:

- Non-Pathologist Physician
- Laboratory Supervisor

Continue to work on the collaborative database between CEDEP (Communicable and Environmental Diseases and Emergency Preparedness) and the Medical Laboratory Board. The Board Director is currently working with a Project Manager on the design components of the database.

A copy of this report is kept on file in the administrative office.

Motion to approve the report as given: Dr. Vaughn
Second: Ms. Briggs

The report was accepted as given.

A request was made to purchase two (2) printers/scanners for survey staff to have a backup for the older models in current use.

Motion to approve the request for printers/scanners:
Dr. Davis
Second: Ms. Briggs

The request was approved.

Counsel Mark Cole gave his report for the past quarter:

The Conflict of Interest Policy was reviewed with the Board members.

One (1) open case is currently in the Office of General Counsel.

The personnel rule revisions are in an internal review.

Board Attorney Report
Mark Cole
Senior Associate General Counsel

Motion to accept the Office of General Counsel Report
as given: Ms. Briggs
Second: Dr. Hardison

The report was accepted as given.

Regional Surveyor Reports:

Complaint Investigations
Proficiency Testing Events
Regional Offices:
East, Middle, West TN

ETRO Report: 2nd Quarter
Fowlen Anders, MT
Consultant/Surveyor

East Tennessee Regional Office –Second Quarter 2021

Complaint Investigations: One (1)

Unsuccessful Proficiency Testing: Zero (0)

- First Occurrence (two in a row or two out of three unsatisfactory scores: Zero (0))
- Second Occurrence (three in a row or three out of five unsatisfactory scores: Zero (0))

MTRO Report: 2nd Quarter
Susan Wilson, MT
Consultant/Surveyor

Middle Tennessee Regional Office –Second Quarter 2021

Complaint Investigations: One (1)

Unsuccessful Proficiency Testing: One (1)

- First Occurrence (two in a row or two out of three unsatisfactory scores: One (1))
- Second Occurrence (three in a row or three out of five unsatisfactory scores: Zero (0))

WTRO Report: 2nd Quarter
Debbie Haggard, MT
Consultant/Surveyor

West Tennessee Regional Office –Second Quarter 2021

Complaint Investigations: One (1)

Unsuccessful Proficiency Testing: Zero (0)

- First Occurrence (two in a row or two out of three unsatisfactory scores: Zero (0))
- Second Occurrence (three in a row or three out of five unsatisfactory scores: Zero (0))

Motion to accept the reports as given: Ms. Gidcomb
Second: Mr. Stanton

Reports were accepted as given.

Board Ratifications Initial Facility Applications:

1. **Blood Assurance, Inc. Nashville Reference Laboratory**
60 Parris Avenue
Nashville, TN 37210

Specialties: Immunoematology
ABO Group Rh Type
Antibody Detection Transfusion
Antibody Detection Non-Transfusion
Antibody Identification

Laboratory Director: Theodore Kieffer, MD
Clinical Pathology

Surveyor: Susan Wilson, MT Consultant II/MTRO

Motion: Dr. Vaughn
Second: Ms. Gidcomb

The license was approved.

2. **Octapharma Plasma, Inc.- Memphis**
4212 Elvis Presley Blvd
Memphis, TN 38116

Specialties: Spun Hematocrit
Total Serum Protein

Laboratory Director: Matthew Dress, MD
Clinical & Anatomic Pathology
Hematopathology

Surveyor: Debbie Haggard, MT Consultant II/WTRO

Motion: Dr. Gibson
Second: Ms. Briggs

The license was approved.

3. **TriStar Century Farms FSED**
2127 Century Farms Parkway
Antioch, TN 37013

Specialties: Microbiology
Bacteriology
Virology
Chemistry
Urinalysis
Endocrinology
Toxicology
Hematology

Laboratory Director: Nitin Marwaha, MD
Clinical & Anatomic Pathology

Surveyor: Susan Wilson, MT Consultant II/MTRO

Motion: Dr. Gibson
Second: Ms. Gidcomb

The license was approved.

4. TDS Labs, LLC.

342 22nd Avenue North
Nashville, TN 37203

Specialties: Virology (Limited)
General Immunology (Limited)
Molecular Diagnostics

Laboratory Director: Jess G. Evans, PhD

Surveyor: Susan Wilson, MT Consultant II/MTRO

Motion: Ms. Briggs

Second: Mr. Barker

The license was approved.

Other Business/Discussion:

Guidance for Administrative Staff
Regarding the Processing of Urgent
Point-of-Care Exemption Requests
Between Board Meetings

After discussion, the Board decided to table this decision
until the October Board meeting.

Motion: Ms. Gidcomb

Second: Mr. Barker

The motion was approved.

Election of Vice-Chairman

The nomination for Full Board Vice-Chairman was Ms.
Jolly.

Motion: Dr. Davis

Second: Mr. Barker

The nomination was approved.

Adjournment:

With no further business to discuss, the meeting was
adjourned at 12:15 pm CDT.

Motion to adjourn: Dr. Gibson

Second: Dr. Davis

The meeting was adjourned.