

On Stage

Volume 32, Issue 2 Spring 2013

Total Quality Management in Surgical Pathology

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In 2012, the Medicare Clinical Laboratory Fee Schedule was cut by 2%, which is estimated to total up to \$2.7 billion in 10 years. In addition, CMS lowered payment for the technical component (TC) of the surgical pathology code 88305 by 52% at the start of 2013. This change alters the global payment for 88305 by 33%. Additional high volume CPT codes for the laboratory are also undergoing review by CMS that hints at further revenue cuts in the future. The health commissioner of New York State has announced that in five years, NYS Medicaid will no longer be a fee for service system but a pay for performance system. These changes that herald a new era of health care reform present a challenge for laboratories in general, and the histopathology laboratory in particular. New approaches to management will be required; ones that emphasize improved quality, reduced errors and cost-effective processes. Fortunately, there is a vast wealth of quality improvement literature from manufacturing that may be applied to the laboratory. Some of the best philosophies have been in use by forward-looking laboratories and have led to increased quality and lowered costs. The best results are obtained by using the Total Quality Management philosophy pioneered by Toyota Motor Corporation.

Total quality management (TQM) is an integrative philosophy of management for continuously improving the quality of products and processes. Before we can start talking about TQM, we need to know what we are managing/improving when implementing a TQM program. Let us start by defining what the product of a surgical pathology laboratory (SP Lab) is. Production starts with the arrival of raw material from the clinician in the form of a biospecimen from the patient. The biospecimen is accessioned, grossed, and processed into glass slides for review by the pathologist. The pathologist reviews the slides and produces an analysis that is signed out and delivered to the clinician either in electronic or hardcopy version. (This workflow is summarized in Figure 1.) All the processes and resources within the surgical pathology laboratory are focused on producing a surgical pathology report and each step in production adds value to the final product. Therefore the product of the SP Lab and the target of a TQM program is the surgical pathology report.

The goal of TQM is to meet or exceed customer expectations for the product received, a goal that will be difficult to define and achieve if customers are not involved. The biggest mistake that SP Labs make in implementing TQM programs is the belief that quality is the responsibility of a single person or group of persons. Quality is everyone's responsibility and the more people in your value chain involved in quality improvement, the better the quality. TQM programs should involve managers, workforce, customers and suppliers. In the SP Lab, this translates to the supervisors (management), staff (workforce), vendors (suppliers), clinicians (suppliers/customers) and patients (customers). The goal of TQM is to meet or exceed customer expectations for the product received, a goal that will be difficult to define and achieve if customers are not involved. The customer must be involved in deciding specifications for the product and part of the SP Lab's job is to educate customers about new 'features' being added to the product, either as an enhancement or a regulatory requirement.

Continued on Page 7 ...



On Stage is published quarterly by the New York State Histotechnological Society for its membership. Contributions, suggestions and advertisements are welcome. Please visit the NYSHS website for submission information and guidance. Permission to reprint is granted as long as source and author are acknowledged and a copy of the reprint is sent to the editors. Articles without bylines are written by the editors. Please submit manuscripts to the editor-in-chief.

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- December 1 – Winter
- March 1 - Spring
- June 1 - Summer

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NYSHS General Membership Meeting

Islandia, NY
April 27, 2012

The meeting was called to order by President Luis Chiriboga at 4:59pm, seconded by Amy Farnan. The minutes from the May 14, 2011 meeting were read. Motion to accept by Mary Georger, second by Sarah Mack.

Treasurer: Michelle Fuller reported that the beginning fund balance for the period October 2011-March 2012 was \$14,483.60. The ending fund balance for the period of October 2011-March 2012 was \$16,878.39 Accepted by Amy F, second by Leanne S.

Membership: Amy Farnan reported 163 members in good standing with 6 student members. Reminder to all renewals start 6/12; membership forms available at Registration during this meeting. Motion to accept membership report as read: Leanne S, second Sarah M

Newsletter: Amy Farnan reported that our state newsletter is going out quarterly and she would love to hear from the general membership on any news regarding announcements, achievements in the laboratory, etc. She also reminded all present to check with Registration to make sure we have the correct e mail address to ensure future delivery of e newsletter. Motion to accept newsletter report as read: Linda C; second Diana S

Nominations: The positions to be filled include President, Corresponding Secretary, Membership Secretary and 3 BOD seats. Nominations forms are available in folders given to attendees. Nominations from the floor: Sarah M nominates Nathan Jentsch for BOD seat, he accepts. Michelle F nominates Diana Scott for BOD seat; she accepts. Amy F nominates Linda Chen for Corresponding Secretary; she accepts. Mary G nominates Sarah Mack for Membership Secretary; she accepts. Mary G nominates Luis Chiriboga for President; he accepts. Nominations will be open until May 1, 2012.

Awards: Luis C reports that as this is a Region meeting, no NYSHS awards were given. The following recognitions will be given at tomorrow's luncheon: president's award, NYSHS fellowships, and HOTY (Region I)

New Business: NYSHS membership dues will be increased to \$25 effective for membership year 2014. Amy F motion to accept; Leanne S second, motion approved.

General Announcements: Call for NSH delegates. Please submit name to Luis C to start credentialing process. Delegates representing NYSHS will be reimbursed ½ night stay at NSH.

NSH 2013 will be in Providence, RI. NYSHS is hoping to hold a one day Spring meeting at the SUNY Cobleskill campus, tentative date is mid April 2013

Laurie Marien handed out Certificates of Appreciation to: Kerri Lindberg, Clare Thornton, Evelyn Vasquez, Virgil Hernandez, Pam Colony, Kim Rhatigan, Leanne Angel for all their help with Career Day (80 students). She also thanks all the vendors who contributed equipment and supplies: PolyScientific, Dako, Source Medical, Leica. Please be sure to visit them in the vendor hall during this meeting.

Luis motioned to adjourn the meeting at 5:27pm. , Second by Sarah Mack.



Spring Letter



We are pleased to offer a 1 day annual meeting at historic SUNY Cobleskill campus on April 14th. NYSHS has not visited the campus since the early 1980's and there have been many changes to both the campus and the program in that time. As many of you know the Histotechnology Program was forced to close its doors in 2006 when NYS passed legislation and created regulations for the Clinical Laboratory Practice Act. In 2008, after substantial efforts by SUNY Cobleskill, NYSHS officers and several key legislators, an amendment to the original legislation was passed that recognized Histotechnology as a distinctly separate licensure pathway. While the structure and organization of the law is far from perfect, the inclusion of Histology as a license category guarantees that the histology field will be recognized by NYS department of education insuring that the program will remain open for the foreseeable future. Considering the need for histotech in NYS and the increasing enrollment in the program over the last few years, the program is set to thrive. However, there is still work to be done. The program is always looking for used equipment and or supplies, affiliate sites, and people who are willing to volunteer sometime to help the students become histologist. I invite you all to come and take a look at the newly remodeled science building and in particular the Histotechnology Laboratory and see if you can find some time to help guide the next generation of histology students.

We have a great meeting lined up. We are honored to have NSH president, NYSHS Fellow and past president Beth Sheppard giving the "key note" lecture on the future of histology and anatomic pathology. We are also pleased to have Dr. Brian Caserto from Cornell University talking about veterinary histopathology and Lorelee MaMahon from University of Rochester to talk about IHC and ISH. The Histotechnology students will be providing a quick tour of the new science building and the renovated histo lab. As always we will have the wonderful vendors showing their wares and of course the traditional luncheon raffles give away. We have a lot of awards to scholarships, offering over \$1500 to be used for traveling to meetings or for educational opportunities, with NSH in providence Rhode Island, a great way to get some funding to attend.

There is lots of info in this issue so be sure to read all the way through and we hope to see you in Cobleskill !

Luis



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Take a Moment

by: Diana Scott

University of Rochester Medical Center

March 10, 2013 is Histotechnology Professional day! Celebrate and Give thanks!

Take a moment and reflect about those who are near and dear to us. Consider the individuals whose hard work, dedication and determination help to give meaning to our careers. It is our mentors, colleagues and co-workers that inspire us to do the best we can every day. On this day and everyday remember those who have significantly influenced our success in the field or in our own personal lives and those too who we may have lost.

I write this brief story in an attempt to recognize all laboratory professionals behind the scenes. It is those individuals not in the lime light, or looking for acknowledgment. Who come to work every day, giving of themselves and contributing to the treatment of those suffering from cancer or other medical conditions. It is a reflection of the good nature of many who practice histotechnology and those who often go unrecognized.

Reflection: One act of Kindness and the Straw that Broke Cancer's back

I wish to recognize a colleague whose straw tried to break the cancers' back. When I heard of this story, I thought others should reflect on how one simple act can have a huge effect on another.

During a recent frozen section consultation, our pathologist Dr. Mahlon Johnson entered a room where a young patient's stuffed cow was situated close by. Being a soft hearted type of guy, he thought wouldn't it be nice if the patient awoke to find a bail of hay there for the cow. Well, upon returning to the Neuropathology unit, he asked histologist Frances Vito, if she had any spare yarn around. You see, Francis knitted scarves in her spare time for charity. Each year she would pick a separate charity and sell the scarves with proceeds going to specific charitable organization. She said you can't just throw something together. Well she got busy and knitted a bail of hay for this young patient which was left so that when she awoke in her room, she would see that not only was she being taken care of but that her cow was being taken care of too. The mother wrote to the Hospital Administration telling how wonderful and touching this act of kindness had on them and their daughter during this difficult time of treatment.

From increasing demands in the health care arena, fast paced laboratory environments, state regulations, licensure, staffing shortages, and all the natural disasters that continue to contribute to the stress and challenges in our life and add an unexpected illness to the mix and what you have is an ever changing life event.

Each day we give of ourselves to benefit patients, whether it human or animal or even our own peers. It just takes a pleasant smile, a hand held door, a simple good morning that can set the tone for the day. That simple expression of ICARE can make a world of difference. Here at the University of Rochester we recognize the need to live the ICARE values. If you treat each other with respect and integrity, then that simple act of kindness makes a world of difference and has a significant impact on the way we treat our patients and each other. Take a moment, step back, reach out that hand, give thanks and show you care.



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Total Quality Management...Continued From Page 1

The two main components of TQM are Six Sigma and Lean. Six Sigma is a business strategy developed in the mid-80's by Motorola and emphasizes increasing quality by eliminating defects. Six Sigma is derived from a statistical measurement that is expressed as a 99.99966% defect-free production. In the SP lab, this would be the equivalent of 3.4 errors per million reports generated. Six Sigma focuses on identifying and removing systematic causes of defects to ensure that the production process is precise and accurate. In the SP Lab, defects are defined as errors in the surgical pathology report; precision and accuracy equate to minimal variability and meeting specifications/standards, respectively. Lean, also called lean manufacturing, lean enterprise, or lean production, emphasizes increasing value by eliminating waste in the workflow system. Value is defined as any action or process that a customer would be willing to pay for, and any action or process that uses resources without adding value is considered a waste. Examples of waste are: time waiting, overproduction, excess inventory between processes and defective products. Waste in the system leads to delays, work stoppage or reprocessing of returned products. The goal of Lean is to eliminate waste in the value creating process. The combination of Lean and Six Sigma has a synergistic effect in increasing product quality and added value to the product.

Lean Six Sigma is also known as continuous improvement process (CIP) or Kaizen, which embraces the philosophy/concept that small incremental improvements that proceed towards an overall goal of quality, is superior to large improvements that severely disrupt the process being improved. CIP encourages everyone involved in the workflow to participate in the quality improvement, and formation of committees/working groups is discouraged. Implementation of CIP is often problematic when resistance is not taken into consideration and change management is an important part of CIP. There are several general sources of change resistance (Table 1a) and suggested solutions to overcome resistance (Table 1b). The most important (and most difficult) step in change management is changing from a culture of blame to a culture of problem solving. Workers must feel empowered to offer solutions and be given credit for solving problems. Workers and managers must function in an environment that prioritizes answering "what is the problem" and "how do we solve the problem", rather than "who is to blame". In the SP Lab, this translates to regular short meetings with staff and supervisors/managers with the goal of enumerating current workflow problems, possible solutions and possible future problems. Short summaries (preferably with bulleted action points) are then disseminated to the staff for solution testing and guidance. These meetings may be daily (at the start or end of shifts) or weekly and last no more than 15-30 minutes if properly managed.

Total Productive Maintenance (TPM) is the component of TQM aimed at equipment used in the workflow. It seeks to establish general maintenance guidelines for specific equipment to maximize reliability. Possible problems associated with each piece of equipment are enumerated, along with probable reasons and frequency of the problem. Preventive measures for each problem are formulated and implemented as a maintenance program. This reduces equipment unavailability caused by most common problems. The problems are also classified based on how quickly the problem can be fixed and whether local (worker) or specialized (service engineer) skills are needed for repair; information that allows staff and managers to quickly decide whether to wait for repairs or find other solutions to minimize workflow disruption. TPM also monitors equipment quality to ensure that equipment are functioning within specifications and producing quality products. The end result of TPM is to increase staff confidence that all equipment used will perform within required specification limits, and provide information for rapid troubleshooting in case of equipment problems.

Workflow control allows managers to reduce waste and keep the balance between efficiency and effectiveness. There are several methods for workflow control but all share one goal: to clear work out of the system and minimize wait time between processes in the system. One use of workflow control in the SP Lab is in inventory management of materials used. The Kanban system uses a signaling system, usually visual, that alerts workers to replenish materials from storage and alerts supervisors to order additional materials from vendors. By limiting the amount of material within the work area, the likelihood of accidents (e.g. spills) is decreased; the decrease in stored materials also leads to less waste in the form of idle raw material in storage. This is the basis of just-in-time inventory used by manufacturing and retail firms.

Wait time should be minimized in all production systems and is one of the largest source of waste that can be readily rectified in any system. As illustrated in Figure 1, there are two main processes in the SP Lab that control workflow by dint of wait time: specimen processing and slide staining. These two areas are bound by equipment and increasing assigned resources will not make significant changes in wait times. The decision between small and large batches at these bottlenecks will be made individually by laboratories, as no single "good" answer is available. The main guides for decision-making would be whether other resources in the workflow will have prolonged idle time, and the availability of resources to process large batches coming out of these bottlenecks. If the downstream workflow resources cannot be shifted to other areas of production, then smaller batches at the bottleneck processes may smooth workflow into a more efficient system. On the other hand, having resources that can be switched to and from other processes in the system (e.g. technicians work on other SP lab processes during wait times) can make large batches a more reasonable option. Having larger capacity equipment does not always lead to more efficient systems and lower costs through economies of scale. Equipment capacity should always be seen in the context of system capacity and workflow control.



Total Quality Management Continued...

Continuous Flow Processing (CFP) is a concept that arranges work inside each process to flow smoothly from one step to another within the system. The aim of CFP is to decrease waste from wait times, movement, stock on hand and overproduction. Processes within the system are arranged as work cells with defined floor plans for movement of material within and between work cells, and signal systems such as Kanban are used to moderate the workflow. CFP is incorporated in recent model tissue processors that allow virtually continuous operation by combining small batches with high-throughput tissue processing. This allows other areas in the SP Lab to continue with their work with minimized wait time for material from the tissue processor, decreasing wasted idle time for downstream process areas.

Total Quality Management requires standardized work processes. The details of every job/process are done the same way every time. However, staff involvement does not end here because they are not expected simply to do the same job the same way forever. They are expected to, and are proud to have the opportunity to, continually redesign their own jobs through continuous training and staff development. A flexible workforce that has been cross-trained in multiple areas is important in TQM and allows the increase or decrease of staff in a process area according to the variation in production demand.

When implementing TQM, it is important to know the metrics used to measure improvement and whether they are congruent with the program's goals. Defining the proper metrics used is part of the initial planning for a TQM program and incorrect metrics may compound quality control problems. In industrial manufacturing lines, takt time (from the German word *Takzeit* – cycle time) is used to measure the time needed to move from one process area to the next. In order for the completed product to be within the deadline, the time needed to complete work on the product at each area must be less than the takt time. The takt time concept aims to match the pace of production with customer demand and the net available work time available. This is useful in systems that produce different products with different deadlines. In the SP lab, this means that each process area has to complete the work within a specified time to ensure that the report will be generated within acceptable turnaround time. Since turnaround time requirements vary among specimens, with biopsies having shorter specified turnaround times compared to resection specimens, a prioritization system may be established to put slack within the system to good use. Measurement of time spent by the specimen at each area is easy to measure when the system makes use of barcodes or radio-frequency identification (RFID) tags to track specimens within the system. Prior to the use of these technologies, the only way to measure takt time would be to insert dummy specimen into the workflow and measure its progress through the system. Barcodes and RFIDs are not only helpful in decreasing errors of specimen identification; they also generate granular workflow data on mixed specimen types that are processed by the system. Real-time analysis of these data would produce important information in finding areas of improvement within the system.

RFIDs and bar coding are two solutions to the most feared error in the SP lab: misidentification. These costly technologies can reduce misidentifications during the multiple handling of specimens, blocks, slides and reports that occur in the process of generating a surgical pathology report. However, the use of *poka-yoke* techniques can also reduce misidentification with minimal monetary costs for implementation. *Poka-yoke* is a Japanese term that means "mistake-proofing" and refers to any mechanism in a lean process that helps staff avoid (*yokeru*) mistakes (*poka*). Its purpose is to eliminate product defects by preventing, correcting, or drawing attention to human errors as they occur. On the manufacturing line, these may be in the form of visual cues to misassembled items or specific equipment designs to prevent improper insertion of parts, but minor changes in the work area of work process are also used. One of the best applications of *poka-yoke* is in teaching staff when to avoid working in batches. For example, the presence of a batch of multiple labeled slides and blocks from different patients at the microtome station increases the likelihood of switched specimens. The same may occur when leftover labeled tissue cassettes are not discarded prior to beginning work on another specimen. Working in batches may decrease takt time but the increase in the likelihood of misidentification must also be considered. Group discussions by managers and staff about possible areas of error can lead to suggestions on *poka-yoke* procedures to decrease misidentification errors. These are especially useful as both regular meetings and as part of error analysis.

TQM has become a focus in clinical laboratories with the introduction of the Affordable Health Care Act and its focus on promoting patient-centered coordinated care, along with initiatives to reduce health care costs. Both these concepts focus on decreasing laboratory testing and payment based on quality of care. While TQM is not the complete solution and will not restore lost revenue, it is a vital component in the management of the SP Lab to ensure cost-effectiveness and competitiveness in the era of health care reform.

Total Quality Management Continued...

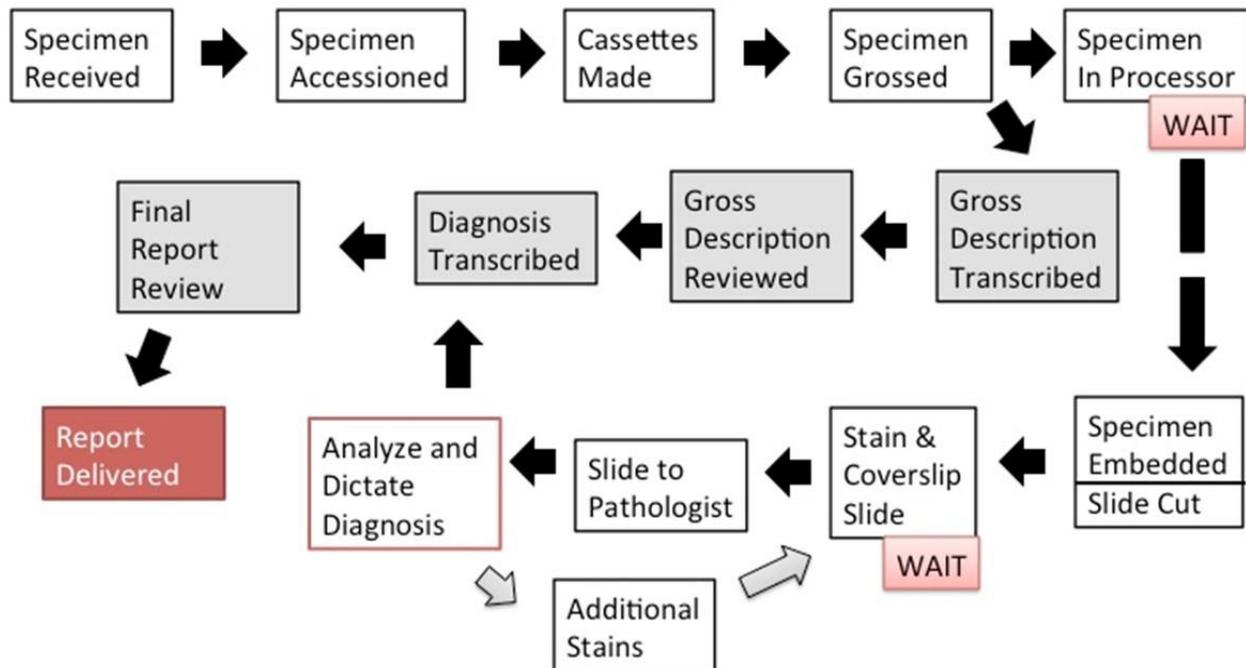


Figure 1: Surgical Pathology Laboratory Work Flow

Table 1a: Sources of Change Resistance

- "If it isn't broken, don't fix it" mindset
 - Fear of failure (blame game)
- Risk aversion (loss of income or status)
- Poor Communication/Misinformation
 - Lack of trust

Table 1b: Factors that overcome Change Resistance

- Staff empowerment and buy-in
- Information and demonstration trials
 - Risk Mitigation
- Problem Solving Culture (*"Find out what is the problem, not who"*)
 - Management Support for culture change



2013 ELECTIONS

The 2013 NYSHS Election Committee is now accepting nominations for the following positions:

- Vice - President
- Treasurer
- Two Members of the Board of Directors

To be nominated, one must be a member of NYSHS for at least one year and currently in good standing. Please be sure *before* nominating a member that they would be willing to serve the Society for a minimum of a 2 year term. If you would like to nominate someone, please fill in the nomination form below. There will be additional nomination forms available at the registration table at the 2013 NYSHS meeting in Cobleskill and on www.nyhisto.org.

Ballots for the election will be sent out in early June. Watch your mail and be sure to vote!!



NYSHS 2013 ELECTIONS

The Nominations Chairperson is accepting nominations for:

- **Vice-President**
- **Treasurer**
- **Two Members of the Board of Directors**

To be nominated, he/she must be a member of NYSHS for at least one year and currently in good standing. They should have expressed a willingness to serve the society. If you would like to nominate someone, please fill in the nomination form below.

I _____ nominate

_____ for the NYSHS office of:

He/She has been a member of NYSHS for at least one year and is currently in good standing. He/She has also expressed a willingness to serve the society.

Nominator's Signature _____

NOMINATIONS MUST BE RECEIVED NO LATER THAN APRIL 14 2013

Please return completed forms to meeting registration desk or:

Kathleen Caleri 57 Azalea Drive West Seneca, NY 14224

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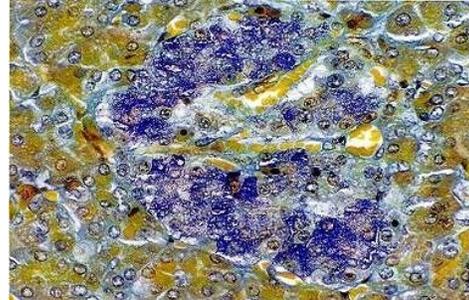
“Keep this in your Site”

Check out “The Histology Page” for descriptions and pictures of Histological stains and any other histology needs at <http://users.adam.com.au/royellis/histo.html>

An islet of Langerhans in normal human pancreas, stained using a modified aldehyde fuchsin technique. Formalin-fixed, paraffin embedded tissue, 4um thick section.

Prepared by:

ROY ELLIS
IMVS Division of Pathology
The Queen Elizabeth Hospital
Woodville Road, Woodville, South Australia 5011



Cobleskill Alumni Reunion

The SUNY Cobleskill Histotechnology is hosting an alumni reunion for all graduates of the SUNY Cobleskill Histotechnology program immediately following the New York State Histotechnological Society Annual Meeting being held on Campus. For more information about the NYSHS annual meeting, please visit: <http://www.nyhisto.org/>. The reunion will take place in the American Heritage room in Prentice Hall from 5:30-7:00 on Saturday April 13th. Beer, wine and light fare will be provided for a nominal fee of \$10.00.

Please contact your classmates and colleagues, bring some music and come share time and stories with your peers. A block of rooms is available and reserved at the Best Western Plus Inn of Cobleskill at the meeting convention rate of \$77.00 for a single or double room. The reservation deadline is **April 1st, 2013**. For a reservation call 1-518-234-4321 or email <http://www.bestwesterncobleskill.com> and give the group code NYSHS.

Please RSVP Dr. Pamela Colony at: Colonyp@cobleskill.edu. Payment should be made out to the Alumni Association and mailed to 211 Knapp Hall, SUNY Cobleskill, Cobleskill, NY 10243



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Effective Communication in the Workplace

by: Sara Laviska
St. Peter's Health Partners

Communication is an integral part of making a work place run efficiently and foster successful personal relationships between staff. Employees who are able to communicate efficiently work as a team and accomplish work by improving the flow by which it's done. It allows the team to move forward to complete the assigned tasks.

There are different kinds of communication some of which include verbal, nonverbal, written and electronic.

Verbal communication is the most easily understood type of communication. It is the communication where ideas or information is conveyed with the use of words. This form of communication allows one to speak to others through presentations, speeches, and discussions. The presenter has to be aware of the tone and the body language that he is exuding. The wrong tone of voice can convey a message of hostility or demand when it is not meant to. A speaker has to be aware of what they are trying to say and how they mean it to come across to the intended listeners. To be a good speaker one has to keep in mind being considerate to others, be brief and to the point, focus on the subject at hand and speak clearly.

Listening is another important part of verbal communication. To be an affective communicator you have to learn the ability to listen to what others have to say. By listening to ideas others have new way of completing tasks might be thought of to improve upon your initial thought. Skills that aid in being a successful listener are to be open minded, take the time to listen and eliminate distractions, pay attention and understand what is being said, allow the speaker to finish and maintain eye contact.

Nonverbal communication is also an important part of how a person communicates. The body language and physical gestures that are made will be perceived by the listener and will aid them in forming their opinion of the speaker. Keep in mind posture, eye contact, and facial expressions when speaking. Clothing and hair style and other physical attributes will also be considered.

Written communications are a way of making the intent of what is being communicated clear to the reader. In the laboratory setting this is most often in the form of standard operating procedures. A well written SOP states the clear intent of the task and step by step directions on how to achieve that task so the process can be reproduced to all readers with the same expected outcome.

Electronic communication is one of the newest forms of communication. With the use of e-mail, internet, and texting new communication skills have been developed. When communicating with coworkers the speaker has to remember to whom they are speaking and make sure the language that is used is appropriate. It is also very important to remember that once a communication is sent the speaker has no way of getting it back or anyone else it can be forwarded to.

Improving the way we communicate with coworkers and staff will foster a feeling of trust. When communicating stick to the issues, manage anger and use pauses to allow for reflection before speaking. Be open-minded to the responses. If this can be accomplished it will lead to good departmental interactions. Share information when available, be honest and allow others to be involved in decision making.



Save the date!!

We are pleased to announce that the 2013 NYSHS Annual Symposium “Back to School” will be held at the State University of New York Cobleskill Campus on Saturday April 13th.

The one day meeting will offer 5 CEU, awards and scholarships. The Symposium program, vendor exhibit hall information, and registration is available here:

<http://www.nyhisto.org/wp-content/uploads/2013/03/2013-NYSHS-program-v2.pdf>

To get more NYSHS news, join the message board:

<http://tech.groups.yahoo.com/group/NYSHS1972/>

or visit the NYSHS website:

<http://www.nyhisto.org/>



NEW CEU POLICY!

Meeting attendees are responsible for tracking their session attendance and reporting it directly to NSH for contact hour credit. Individual State Societies **WILL NOT BE** reporting CEU for members.

Session attendance can be recorded immediately after the session ends through NSH's online Contact Hour Portal: ce.nsh.org (instructions are located below). Attendees must sign in on the State Meeting Roster at check in and complete course evaluations to claim credit through the NSH Contact Hour Portal.

Submit Your Hours to the NSH Contact Hour Portal

1. **Login to NSH Contact Hour Portal** – ce.nsh.org (do not use www prior to the web address) a. First Time to the Site? – complete the “Not Yet Registered” form to create your contact hour portal user account. Once you have created a user account you will be asked to complete the user profile form (your name, address etc). To complete the profile and access hours from previous events you will need your NSH Customer ID number in the first step. If you don't know your Customer ID number contact NSH at histo@nsh.org.

2. Once you are logged in select “Session Tracker” from the top navigation

3. **Add your Contact Hours for an event** a. Step 1: Year: Select the year in which the event was held.
b. Step 2: Event Title: All events approved in a specific year for contact hours by NSH are available to you to in this drop down list. Select the name of the event you attended. You will find your event name listed on the front side of this contact hour tracking sheet
c. Step 3: Session Title: Select a workshop you attended – each workshop needs to be added individually. The number of contact hours awarded for this session is pre-set and cannot be edited.
d. Step 4: Add: Click on Add and your workshop will appear in your session log listed below.

4. **Print your contact hour certificate** a. Click on the box next to each session you would like to appear on your certificate.
b. Make sure you click all of the sessions from one event if you want them to appear on one certificate.

NEW YORK STATE HISTOTECHNOLOGICAL SOCIETY

MEMBERSHIP APPLICATION



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Zip Code: _____

E-mail: _____

Phone: _____ Home

Phone: _____ Work

Employer: _____

Type of Membership: (check one)

- New
- Previous (date previous membership)
- Student (College name)

Instructor's signature

National Information: (check one)

- Member of the National Society for Histotechnology
- Non-Member
- Please send me an NSH application

Nature of Work: (check one)

- Clinical
- Research

Education (highest level): _____

- HT
- MT
- HTL
- Other _____

Referred by member: _____

MEMBERSHIP INFORMATION:

Registration: (check one) Membership year runs from July 1 to June 30

Education Annual Membership Fee (tax deductible): \$20.00

Student Full Time Student Fee: \$7.00

Membership will expire June 30th,

Please send applications & check payable to NYSHS to:

Sarah Mack
NYSHS Membership Secretary
8162 Quanz Rd
Wayland, NY 14572

