2018 Student Posters

These posters will be displayed at the 2018 ASCLS-WA Spring Seminar, held April 26 - 27, 2018 at the Red Lion Hotel in Renton, WA. Stop by and see them.

Poster 1 ... Roche Liat Strep A Verification

— *Abigail Lundgren, Providence Sacred Heart Medical Center, Spokane, WA*

For our project, we evaluated the Roche Liat rapid molecular platform (an assay intended for point-of-care testing) for the detection of Strep A. We tested positive and negative patient specimens to establish the performance and precision of the assay, which could replace the existing rapid antigen lateral flow devices currently in use at PSHMC.

Poster 2 ... Is Doxycycline a Reliable Alternative for Empiric Therapy of Community-Acquired Pneumonia in the Spokane Region?

— *Lena Lebedinski and Vita Danyuk, Providence Sacred Heart Medical Center, Spokane, WA*

Doxycycline can be used as an alternative drug therapy against *Streptococcus pneumoniae* if the local resistance rate to doxycycline is less than 25%. We looked at the rate of resistance to doxycyline in the Spokane region

Poster 3 … Verification of Alternate EDTA Tubes for Complete Blood Counts

— *Brittany Harris, Jenna Storvick, Providence Sacred Heart Medical Center, Spokane, WA*

We will be looking at whether royal blue trace-metal-free EDTA or pink EDTA tubes yield equivalent CBC results as specimens collected in the standard, lavender-top EDTA tubes for adult patients. We will also be looking into the stability of refrigerated samples.

Poster 4 … Enteric Bacterial Pathogens PCR Panel Verification

— *Kylee James Hraban, Providence Sacred Heart Medical Center, Spokane, WA*

Analysis of a verification study performed at Bonner General Hospital on the BD Max Enteric Pathogens panel.

Poster 5 … Establishing extended stability of Stago D-Dimer Liatest N + P controls

— *Kaitlyn Hohrman, Providence Sacred Heart Medical Center, Spokane, WA*

The goal of this project is to extend the stability of the D-Dimer Liatest N + P controls on a Stago instrument to 24 hours.

Poster 6 … Validation of cobas Liat Influenza A/B & RSV Assay for Use in Rapid Molecular-based Point of Care Testing in the Emergency Department

— *Sydney Hiebert, Providence Sacred Heart Medical Center, Spokane, WA*

Describes the process and results of our validation on cobas Liat Influenza A/B & RSV Assay for detection of target viruses in former Influenza A/B & RSV positive samples.

Poster 7 … Detection of Sexually Transmitted Organisms by the BD MAX PCR Analyzer

— *Cassandra Johnson, Providence Sacred Heart Medical Center, Spokane WA*

This poster provides a complete validation of the BD MAX automated PCR vaginal panel done at Bonner General Hospital. This Validation was done to confirm sensitivity and specificity of the method in order to provide in house testing and shorter turn around time.

Poster 8 … Comparison of the Plasmodium 18S rRNA RT-PCR Assay to Blood Smears in Conjunction with BiNaxNOW® RDT in Returning Travelers

— *Alex Jim Melnichuk, University of Washington, Seattle, WA*

A comparison between a molecular assay and the standard protocol by University of Washington Medical Centers in the diagnosis of malaria. The research showed that the molecular assay was highly sensitive and specific, but does have its shortcomings.

Poster 9 … Differentiation of HIV-2 Antibody by Bio-Rad Geenius HIV 1/2 Supplemental Assay

— *Eugene Deng, University of Washington, Seattle, WA*

This study was to evaluate how well the BioRad Geenius assay differentiated HIV-1 and HIV-2 antibodies. Consistent with other studies, I found that many HIV-2 samples showed HIV-1 antibody cross reactivity.

Poster 10 … Classification of the MSH6: c.2342C>T Variant as Likely Causing Lynch Syndrome: A Co-Segregation Study and Application of Sanger Sequencing

— *Sarah Lintag Upham, University of Washington, Seattle, WA*

A co-segregation study was performed by the University of Washington Genetics and Solid Tumors Division on a family with a variant of uncertain clinical significance in the gene MSH6 (NM_000179.2, c.2342C>T), to assess if the variant was co-segregating with disease phenotypes normally associated with Lynch syndrome. Application of a bioinformatics, rule-based wInterVar analysis and a multivariate Bayesian analysis demonstrated that the variant was likely to be pathogenic.