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Questions or comments?

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Eastern Pathology Alliance



www.easternpathologyalliance.nhs.uk

If you have any requests for topics you'd like to see in future newsletters, please let us know...

EPA LAB NEWS

Seasons Greetings from EPA!!

Happy Christmas, although there will be less normal working days over the Christmas period, the laboratories will be working 24/7. If you have an urgent sample just get it to the lab, at the NNUH, level 1, East Block we will process the sample...

Nigel Roberts



Newsletter Spotlight

HBA1C ANALYSER CHANGE (FROM 16DEC24)

As part of our routine analyser refreshment programme the analyser required for HbA1c analysis was procured in Autumn 2024. This assay has been fully verified, as per our quality standards, and is due to go live on Monday 16th December 2024.

There are some fundamental differences between the old method and the new method.

We are moving to ion-exchange technology, which means we will now identify the presence of certain haemoglobinopathies. The HbA1c method will not diagnose a haemoglobinopathy, but will make reference to its presence. Depending on the observed type measured, an HbA1c result may be reported, or may interfere and prevent reporting of the result. On some occasions, the applied comments may suggest alternative methods of monitoring.

This will not affect the majority of patients within the Norfolk & Waveney populations. However, due to a change in methodologies there is an observed mean negative bias of 5.5%. As an example, at an HbA1c concentration of 40 mmol/mol, this is a negative shift of ~2 mmol/mol. That means that some patients may shift. This will be important to consider in any patient who may have 2 separate results for diagnosis, and therefore please pay attention in the coming days/weeks in case your patients have 2 results based on the 2 separate methods.

The second cohort to consider are any monitoring results where you may see a reduction in the reported HbA1c.

If you have any questions in the future or would like to discuss further please do not hesitate to contact me.

Dr Emily Leach

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Clinical Lead of NNUH Main Automation Lab
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EPA ANNUAL REPORT 2022 / 2023

Our Annual Report for 2022 / 2023 has been published on our website. To learn more about our services, values, activity and achievements, please take a look...

www.easternpathologyalliance.nhs.uk/wp-content/uploads/EPA-ANNUAL-REPORT-071024.pdf

THE MANAGEMENT OF EXPOSURE TO VARICELLA ZOSTER VIRUS



Advice on the management of exposure to varicella zoster virus follows instructions in

“The Guidelines on post exposure prophylaxis (PEP) for varicella or shingles (UKHSA, January 2023)”

According to the Guideline, oral acyclovir or valaciclovir is now the first choice of PEP for susceptible immunosuppressed individuals, all susceptible pregnant women at any stage of pregnancy and infants at risk.

VZIG is recommended for susceptible neonates exposed within one week of delivery and may be considered in individuals with renal impairment or intestinal malabsorption.

For clinical advice on clarification on the use of VZIG, please contact the clinical virologists on 01603 288531.

Dr Samir Dervisevic

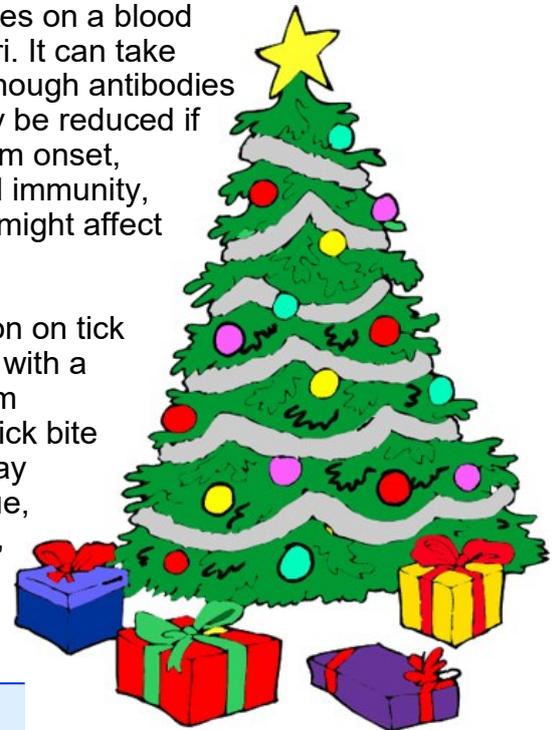
Consultant Virologist and Clinical Lead for Virology

Eastern Pathology Alliance Department of Microbiology

TEST FOR LYME DISEASE

Laboratory diagnosis of Lyme disease (*Borrelia burgdorferi*) relies on a blood test that detects antibodies (IgM and IgG) to *Borrelia burgdorferi*. It can take several weeks after infection for the immune system to make enough antibodies to be detected by the test. The accuracy of test for *Borrelia* may be reduced if testing is carried out too early (e.g. within 4 weeks from symptom onset, before antibodies have developed) and the person has reduced immunity, for example, people on immunosuppressant treatments, which might affect the development of antibodies.

Requests for testing for Lyme disease should include information on tick bites, symptoms and their duration. Lyme disease may present with a red rash (erythema migrans) which usually becomes visible from 1 to 4 weeks (but can appear from 3 days to 3 months) after a tick bite and lasts for several weeks. In addition symptoms and signs may include fever and sweats, swollen lymph glands, malaise, fatigue, neck pain or stiffness, migratory joint or muscle aches and pain, cognitive impairment (e.g. memory problems and difficulty concentrating), headache, paraesthesia.



NNUH PHLEBOTOMY APPOINTMENTS

Book blood tests at a time to suit you

PLEASE NOTE PHLEBOTOMY CLINICS AT THE NORFOLK & NORWICH UNIVERSITY HOSPITAL ARE

BY APPOINTMENT ONLY

Over 16's Blood Tests (East Outpatients)

<https://my.drdoctor.co.uk/clinic/phlebnnuh>

Children's Blood Tests (West Outpatients)

<https://my.drdoctor.co.uk/clinic/nnuhchildrenbloodclinic>

APPOINTMENTS ARE AVAILABLE :

MONDAY - FRIDAY

08:30 - 16:45

(Excluding Bank Holidays)

Please only call the department on 01603 286921 if you are unable to book online or have a special request required for your child.



MICROBIOLOGY SERVICE IMPROVEMENT - UPDATED CONTACT GUIDANCE

Dear Service Users

We value your collaboration and strive to ensure timely and effective communication for clinical advice. To streamline this process, we would like to share the following updates and guidance regarding contact with the Microbiology Department:

For Clinical Advice, Please Call:

- **Bacteriology:** 01603 288459
- **Virology:** 01603 288531

Due to increasing demand, these lines may occasionally be busy. If you are unable to get through, please use our alternative contact:

- **Microbiology Office (Message Service):** 01603 288587

You can leave a message for the required clinician, and we will ensure a microbiologist gets back to you promptly.

Important Update on Email Usage

Please note: **The departmental operational and business email address is NOT for clinical advice.**

Using email for clinical advice delays patient management, as email responses are not immediate and may lack the detailed clinical information necessary for appropriate guidance (e.g., current clinical presentation, allergy status, etc.).

To enhance our service:

- An automatic response has been added to the departmental email address to remind users that it is not for clinical advice
- The automatic response includes the contact numbers listed above for reaching a microbiologist or leaving a message

Thank you for your understanding and cooperation in helping us provide the most efficient and effective service possible.

Dr Davis Nwaka

Consultant Microbiologist and Microbiology Service Lead
Department of Microbiology



OBSERVATIONS ON A HOSPITAL PERIMETER WALK

Read a poem inspired by one staff member's lunchtime walk around the hospital...
 Shelina Rajan, our Clinical Nurse Specialist for Familial Hypercholesterolaemia, walks around the perimeter of the NNUH hospital every day. "It struck me just how much I was seeing in terms of snapshot observations of daily life. I decided to make some notes and before I knew it, I'd written this poem and wanted to share it with you all. Hope you like it!"



CHRISTMAS WORD SEARCH

A	S	V	S	D	I	A	M	Z	S	I
Y	H	E	B	L	F	W	L	T	G	Z
G	K	S	I	Z	J	O	D	R	Y	F
U	P	A	R	T	R	I	D	G	E	S
J	I	P	D	D	Q	S	O	K	S	G
T	P	W	S	B	N	P	V	L	E	N
R	E	M	R	A	X	E	E	E	I	I
U	R	X	W	I	D	Q	S	C	D	R
U	S	S	T	O	H	E	W	O	A	Y
S	N	E	H	N	B	V	X	A	L	N
V	M	C	S	R	E	M	M	U	R	D

Walking to the beat of music playing in my ears,
 I've been doing this now for a couple of years.
 Patients in beds being wheeled down corridors,
 They're staring at the ceiling; what must they be feeling?
 Now outside, patients and staff are scattered,
 Eyes down on their phone, right now nothing else mattered.
 Turn a corner they're sat against the wall in a row,
 Dressed in greens and blues, it's our OTs and physios.
 Snapshots of colleagues on benches, their conversation sounds deep,
 Eyes down I'm sad as one of them is about to weep.
 Some laughter in the distance distracts from the sadness,
 It's a hospital after all with organised chaos and madness.
 Overhead the air ambulance has a reason to land,
 Let's hope the trauma team has everything in hand.
 Visitor's car park not a spare space in sight,
 I can read their mind "Do I turn left or do I turn right?"
 Looking lost and confused clutching their appointment letter,
 I help and I guide to make them feel better.
 A newborn cries, going home for the first time,
 Meanwhile an unmarked ambulance means someone's past their prime.
 Every stranger I see is a one chance meeting,
 Yet still some surprise me with a smile or a greeting.
 A strong sense of community, now there's the thing,
 Who knows what tomorrow's walk will bring...

A **PARTRIDGE** in a pear tree
 Two turtle **DOVES**
 Three French **HENS**
 Four Calling **BIRDS**
 Five gold **RINGS**
 Six **GEESE** laying
 Seven **MAIDS** milking
 Nine **LADIES** dancing
 Ten **LORDS** leaping
 Eleven **PIPERS** piping
 Twelve **DRUMMERS** drumming



CHRISTMAS SPOT THE DIFFERENCE - CAN YOU FIND ALL 10?

