

Barnsley Hospital User Survey 2021 Report

Pathology would like to express their thanks to all those who were able to complete this year's survey.

INTRODUCTION

ISO Standards sub-clause 4.14.3 set requirements that the laboratory management shall seek information relating to user perception as to whether the service has met the needs and requirements of its users. This survey has been performed to comply with these standards, and in doing so, will bring to the attention of the laboratory management any areas of services provided by the laboratory that require improvement.

The user satisfaction survey ran between 14th April to 7th May 2021 and its purpose is to obtain feedback from our users on the quality of the services provided by the laboratory.

The information gained from this survey will enable laboratory management to look at the service we provide and decide how to improve it to meet the needs and requirements of our users, as part of our commitment to continually improve quality.

METHOD

The satisfaction survey was carried out using a questionnaire which was developed in consultation with BRILS Management Team, Clinical Heads of Department and the Laboratory Director, and comprised of 21 questions designed to elicit users' general views on the quality of the services provided by Pathology.

The respondents were asked to rate their satisfaction using the following response options: Yes or No, except in the case of a question asking how the respondent would like to receive communications from the laboratory (answers available were "Email", "News Page via the Website" or "Newsletter"). A percentage distribution of responses was used to present the data and cumulative percentage dissatisfaction compared to cumulative percentage satisfaction.

The respondents were also instructed to use 'not applicable' where appropriate. The penultimate question asks users to provide any comments to improve the service, and the final question asks users to provide feedback of any positive experiences with the service. These have been collated and have been discussed at a feedback session to the BRILS Management Team and actions identified where appropriate. Responses are detailed at the end of the report. All responses received are duplications of the text received.

Separate user surveys have been completed for Community users (DOC 329) and the Phlebotomy Service (DOC 331).

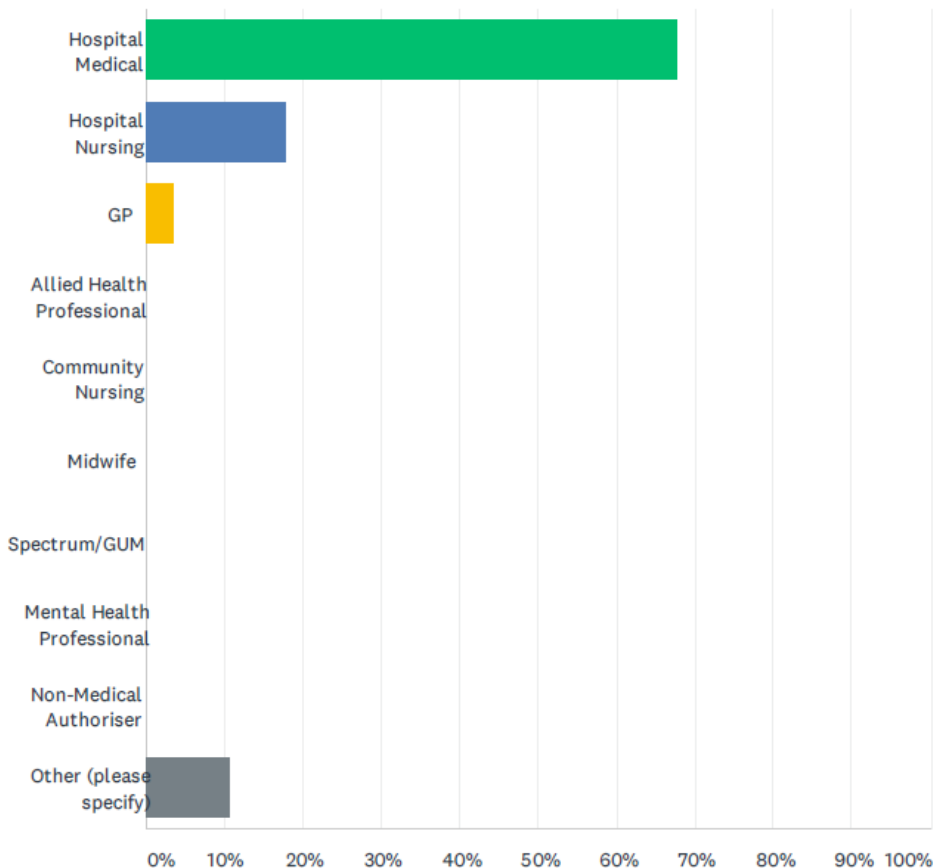
Questionnaires were sent via survey monkey to

- Trust users – via the communications team, direct email lists and hard copies sent to Education Centre during Lunch and Learn.
- 28 Responses have been received.

RESULTS OF SURVEY

Question 1: Staff Group

Answered: 28 Skipped: 0



A total of 28 responses were received from users within the Trust. This is a decreased on the 38 responses on 2020. These responses are broken down into Hospital Medical and Nursing staff as detailed above. Of the two respondents who answered “Other”, their responses were: Community Paediatrician, Pharmacist and MDT Coordinator.

Question 2: Name (Optional)

This question was optional and was included to allow for specific personal feedback to be given where relevant and to enable the incentive of a box of chocolate to be delivered to the winning participant in the draw. For the purpose of confidentiality, the names of participants will not be included in this report. 11 respondents gave their name, whilst 17 respondents opted to submit their response anonymously.

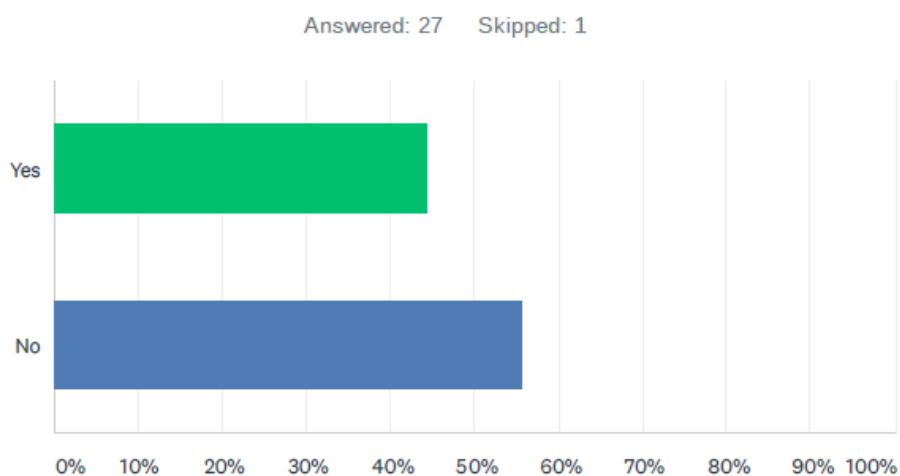
Question 3: Department/Ward (Optional)

Department/Ward	Number of Participants
Care of elderly	1
Public Health	1
Gastro	1
Community paediatrics	1
Acute Medicine/AMU	1
Rheumatology	1
ED	1
Hospice	1
Paediatrics	1
Gynaecology	1
Colposcopy	1
Gynaecology	1
Cancer Services	1
vascular Access service	1
RCU	1
Acute Response Team	1

16 respondents chose to include the department in which they worked, whilst 12 respondents chose to submit their survey anonymously. The above table shows that responses were received from a wide variety of clinical areas within the hospital, covering inpatients, outpatients & surgical areas.

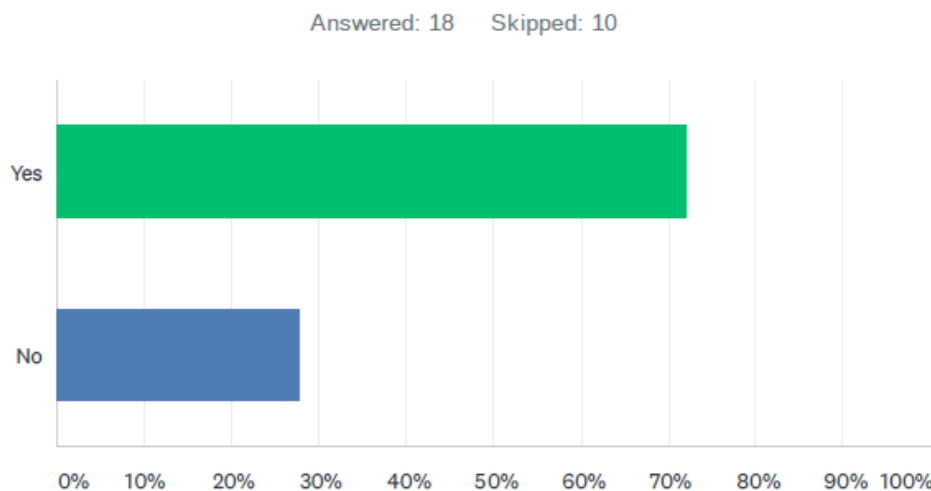
Question 4: Contact Details (Optional)

Respondents were given the option to provide their contact details, should they require a direct response about any of their answers to the questions in this survey.

Question 5: Were you aware that our user information can be obtained via our website?

This question was added to gauge how many users were aware that user information was available via the hub. A hyperlink to the Laboratory Medicine Website on the Hospital Hub was also included in this question to educate users about the location of user information. 56% of respondents stated that they were not aware that the user information was available via the Hospital Hub. This is similar to the result in 2021. This indicates that although work has been undertaken to promote the Pathology Website, further work needs to be undertaken on this.

Question 6: If yes, are you satisfied with the usefulness of the Pathology website as a source of information for each laboratory?

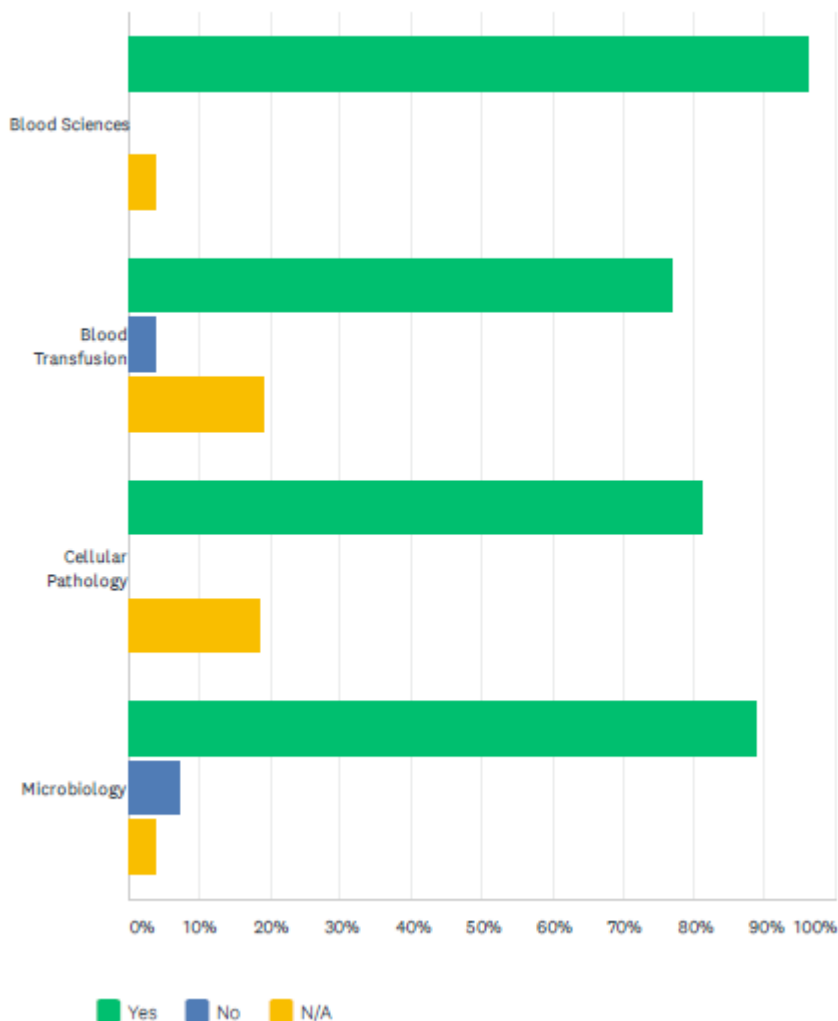


72% of users were satisfied with the usefulness of this as a source of information and 28% were not satisfied or not aware that it existed. . Where associated comments are left, responses are detailed in the table below.

Comment	Response
Had no idea about it	The Pathology Website is available via the following link: http://www.barnsleyhospital.nhs.uk/pathology/
I was not aware	
Not used	
Not gone through it	
	It contains lots of useful information about Pathology and the testing process, including sample & request labelling, sample types/requirements/containers for all tests, result availability and turn-around times, laboratory accreditation, key contacts plus lots more!

Question 7: Are you satisfied with the range of investigations provided by the laboratory?

Answered: 27 Skipped: 1

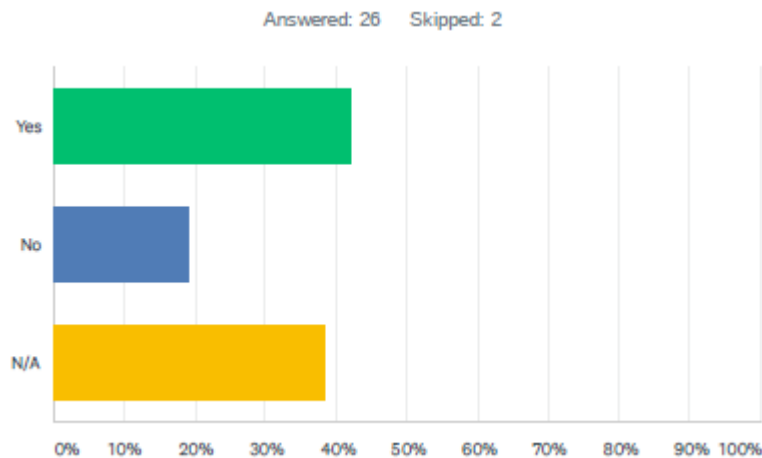


100% of respondents were satisfied with the range of investigations provided by the laboratory in Blood Sciences and Cellular Pathology. In Microbiology, 89% of respondents were satisfied, and 77% of users were satisfied in Blood Transfusion. The issues that have been highlighted via associated comments that were left are in the table below and responses to each issue are provided.

Comment	Response
There has been some test that have been withdrawn from common usage and are now request only such as ast ? the reason is unclear to me	Thank you for your comment. We aim to communicate changes clearly to users via the Trust intranet and to CCGs. The communication for removal of AST can be found here: http://intranet.bdgh-tr.trent.nhs.uk/2021/02/rationalisation-of-liver-function-test-profile/ . Please contact the laboratory if you wish to discuss any changes with us. We have now also implemented a communications page for

	<p>our users:</p> <p>https://www.barnsleyhospital.nhs.uk/pathology/pathology-general/laboratory-communications/</p>
When platelets are needed there is a lot of confusion about arranging transfer from Sheffield	<p>Thank you for your comment.</p> <p>The Sheffield NHSBT centre has now been re-located to Barnsley at J37. This makes the logistics of ordering blood and blood products a lot more efficient for BHNFT. The use of platelets must be approved by a Consultant Haematologist – please refer to Trust Approved Document ‘Guidelines for the Use of Platelets’. The Blood Bank has a regular pick up for Blood Products from NHSBT at 14:45. Once approved and the order is sent to Blood Bank via request form, Blood Bank staff will query if the order is routine or urgent. If it is routine then the blood products will be collected at this time (if the cut off of 13:00 has not been breached). If it is urgent, then a dedicated courier will be ordered to collect the products to be on site in an hour.</p>
PCRs take a long time to come back leading to extended antibiotic courses	<p>Thank you for your feedback.</p> <p>Our test turnaround times are listed on our webpage via the following links: Barnsley: http://www.barnsleyhospital.nhs.uk/pathology/Rotherham: https://www.therotherhamft.nhs.uk/Pathology/Pathology/</p> <p>Please contact the laboratory where experienced turnaround times are outside of the stipulated turnaround time and the laboratory will investigate.</p>

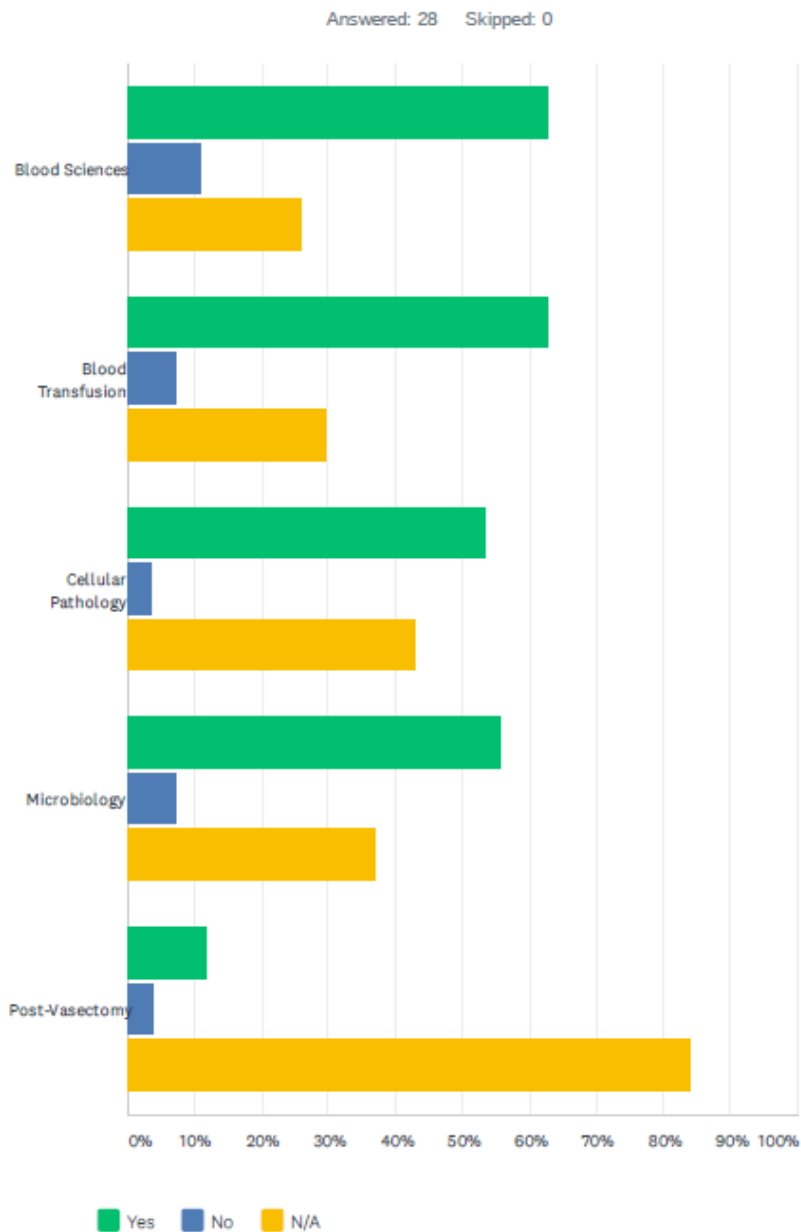
Question 8: Are you with the POD/air tube/chute system used to transport specimens to the laboratory?



42% of respondents were satisfied with the air tube (pod) system used for transporting specimens to the laboratory, which is lower than in 2021 (45%). 19% of users were not satisfied, and 38% of users did not use the system. Where associated comments were left, responses are detailed in the table below.

Comment	Response
That's the best part.	The air tube (POD) system is managed by estates. We have passed on this feedback to the Estates department. Pods are returned via the air tube system as soon as possible after emptying by laboratory staff. Please note that some samples should not be transported via the pod e.g. precious or unrepeatable samples/danger of infection samples. For a full list of samples that should not be transported via the pod, please see the Pathology website.
Its temperamental. occasionally samples get lost	
Occasionally fails but generally reliable	
Most of the time when it is working, pods are available and specimens are received quickly. It does make working out why there are delays a little more difficult if for example pod system has gone down overnight and not identified promptly -still better than relying on people having to walk bloods to lab though.	
Don't use	
Do not regularly use the system	
They never work. there are never any pods	
Samples go missing, POD/ chute system can often break	
Good when it works.	

Question 9: Are you satisfied with the format/layout of the test request form for handwritten non-electronic requests?



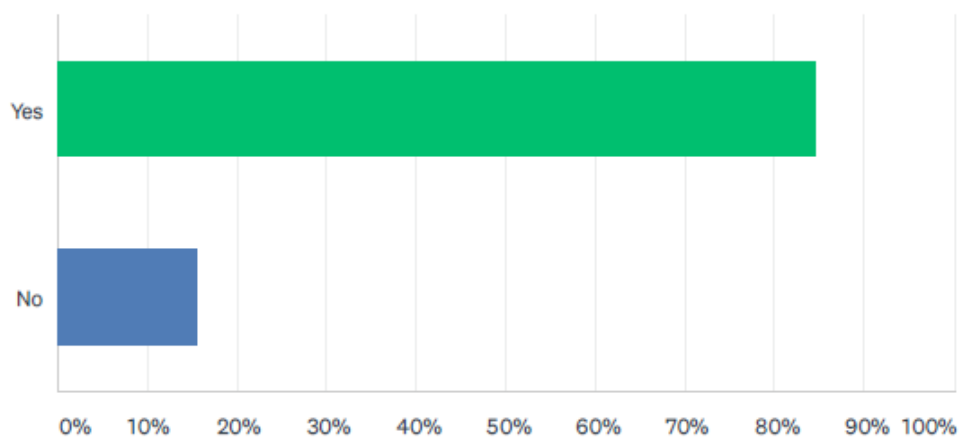
11% of Blood Science users, 7% of Blood Transfusion users, 4% of Cellular Pathology users, 7% of Microbiology users and 4% of Post-Vasectomy users were dissatisfied with the format/layout of the handwritten. Where associated comments were left, responses are detailed in the table below.

Comment	Response
I find the transfusion form quite a complicated document	Thank you for your comment. The Blood Transfusion request form is a legal document which must comply with Blood Safety Quality Regulations (BSQR2005). All fields on the form are important and contain patient safety

	information such as 'special requirements' and 'previous transfusion/pregnancy history'. All fields on the form are mandatory to ensure the sample is processed and not rejected. Please contact the Laboratory if there are areas of the form which you would like to discuss.
Only really use handwritten histopathology forms	Thank you for your comment. There is a workstream underway for electronic requesting of Histology on ICE.

Question 10: Do you use electronic requesting?

Answered: 26 Skipped: 2

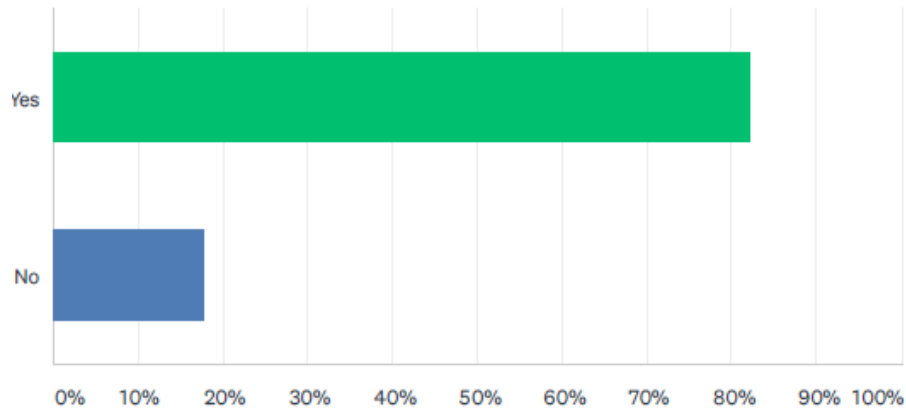


85% of respondents request electronically. This is an increase from 73% in the 2020 user survey of respondents used electronic requesting via ICE. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Easier paper request	Thank you for your comment.
Admin only, I do not request pathology	
Not for histopathology but yes for biochemistry, microbiology	Thank you for your comment. There is a workstream underway for electronic requesting of Histology on ICE.

Question 11: Are you satisfied with ICE when requesting laboratory tests?

Answered: 28 Skipped: 0

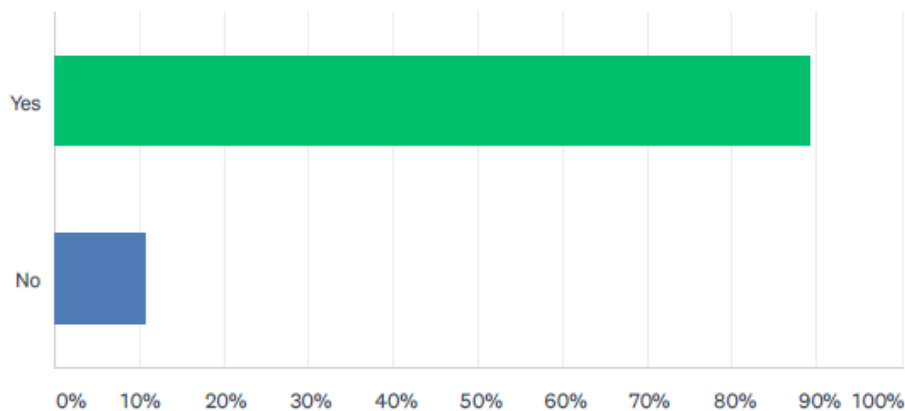


82% of users are satisfied with electronic requesting via ICE, which has reduced from 91% in 2020 survey. Where associated comments were left, responses are detailed in the table below.

Comment	Response
It can be improved. Sometimes too complicated to request a simple test. It is worth while to have a favourite requests for each speciality	Please contact bdg-tr.brils-it@nhs.net for help with this.
Would like more grouped requests for common complaints etc	
sometimes finding a test is not intuitive but overall it works well	
Mostly, except some tests (mainly immunology) aren't on ICE and often don't get done, especially with phlebotomy being at Cudworth	Please contact bdg-tr.brils-it@nhs.net for help with this.
Very good system. the only problem is in relation to printing off requests. often the printer not working, so you then have to look for the test again and try to reprint. this wastes paper and time. However system itself is very good.	Thank you for your comment. Please contact Trust IT for any printer issues.

Question 12: Are you satisfied with ICE when reviewing laboratory results?

Answered: 28 Skipped: 0

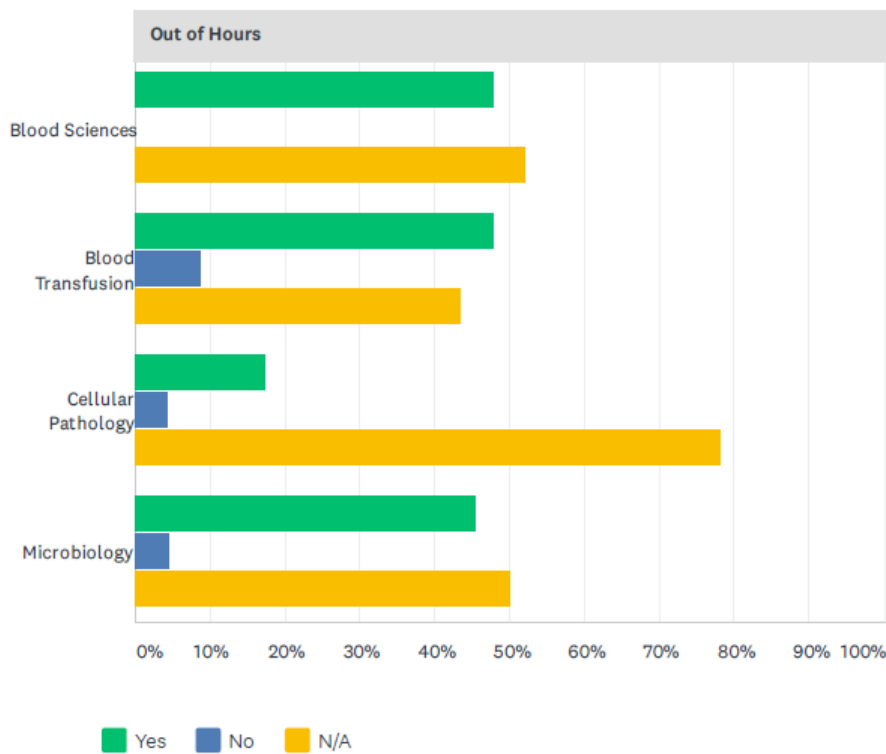
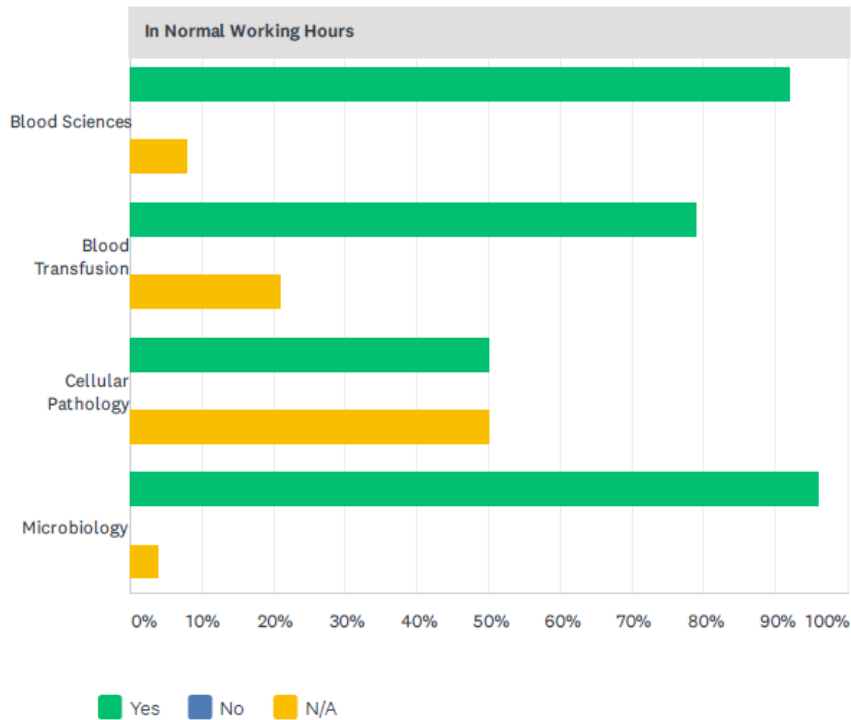


89% of respondents were satisfied with ICE for reviewing laboratory results, comparable to the 2020 survey. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Often requests are put under my name but I am not the consultant responsible for these tests. There needs to be a way of transferring ownership to another consultant so the correct person is responsible for reviewing the results	Requests received are booked in the Laboratory IT system based on the requesting clinician on the ICE order. This comments has been fed back to the Trust ICE filing project for consideration.
Please go back to reporting specimen received on the requests page rather than have a list of pending results that make it look like you've missed things when reviewing	Thank you for your comment. There is work underway to change this process for service users.
When it's working!	Thank you for your comments. We apologies for any disruption caused by ICE downtime. The department performs regular maintenance and checks to minimise any disruption to service users.
Easily accessed and understandable	
It has to be mandatory for each Dr who request a test to acknowledge the result or any action taken/ not taken as soon as the results are available.	

Question 13: Are you satisfied with the availability and usefulness of advice and assistance provided by laboratory staff?

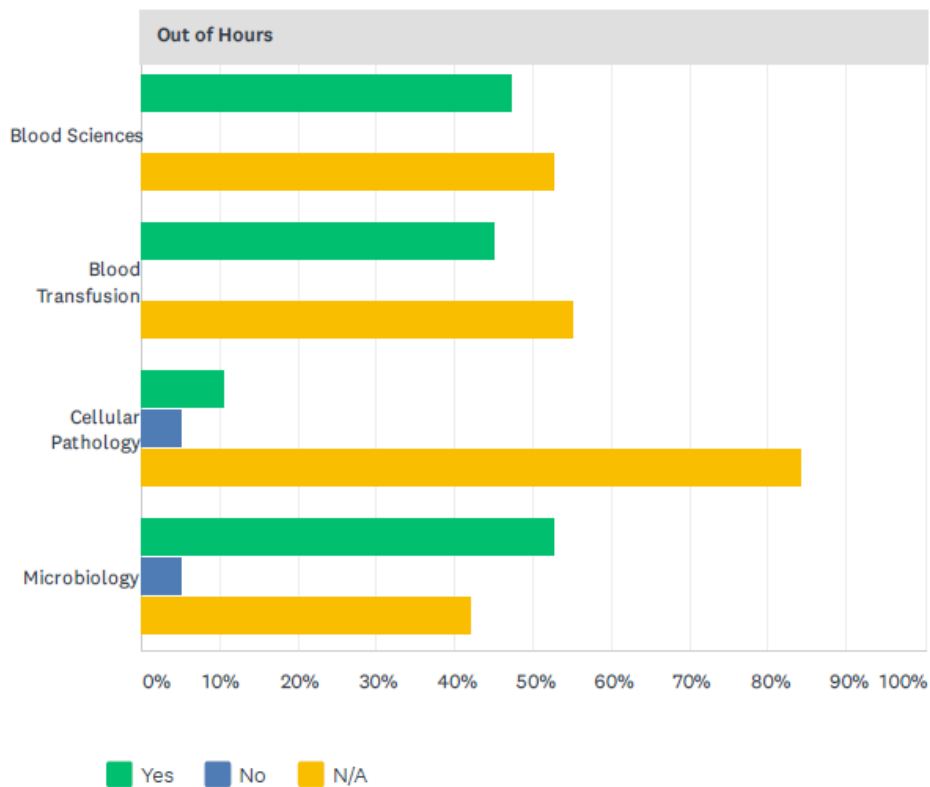
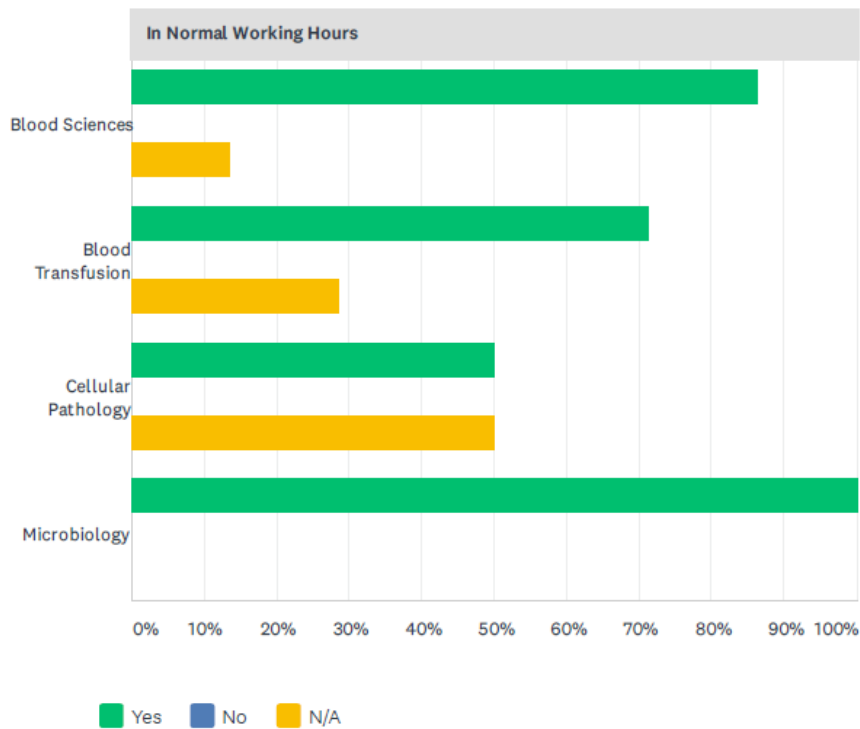
Answered: 25 Skipped: 3



100% of respondents who use the services in normal working hours were satisfied with the advice and availability of assistance provided by laboratory staff. Outside of normal working hours 9% of Blood Transfusion, 4% of Cellular Pathology and 5% of Microbiology users were not satisfied with the availability and assistance provided by laboratory staff. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Out of hours advice can be 'patchy'. Micro advice is very consistent both in and out of hours	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. Compliments relating to individual staff members have been fed back to the individual.
I very rarely have to contact anyone but recently contacted biochemistry lab and staff member was very helpful and polite in assisting me with my query	
I work night shifts a lot and staff in labs are generally very helpful and accommodating. You occasionally speak to someone who is not very pleasant, however I'm unpleasant on occasion at 3am, so not a problem.	
Always friendly and approachable	
I do not work out of hours.	Thank you for your comments. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the website.
I work 9-5 part time.	
Interestingly it is often more difficult to contact the labs (generally) during the day than at night, in the specific circumstance of trying to contact blood transfusion for an MTP for example a dedicated line would be good as I have waited what seems like a long time to try and request urgent blood - not ideal when it's urgent!	Thank you for your comment. Please note that the dedicated Major Haemorrhage Protocol phone number 6181 which is used in Major Haemorrhage activations situations rather than the routine laboratory telephone number. Out of hours (20:00 – 08:45) to contact the Haematology & Transfusion Biomedical Scientist please use bleep 205. This bleep can also be used in urgent situations during the routine working day. Further information about contacting the laboratories in routine or urgent situations can be found on the Pathology website.

Question 14: Are you satisfied with the availability and usefulness of advice and assistance provided by Clinical staff?

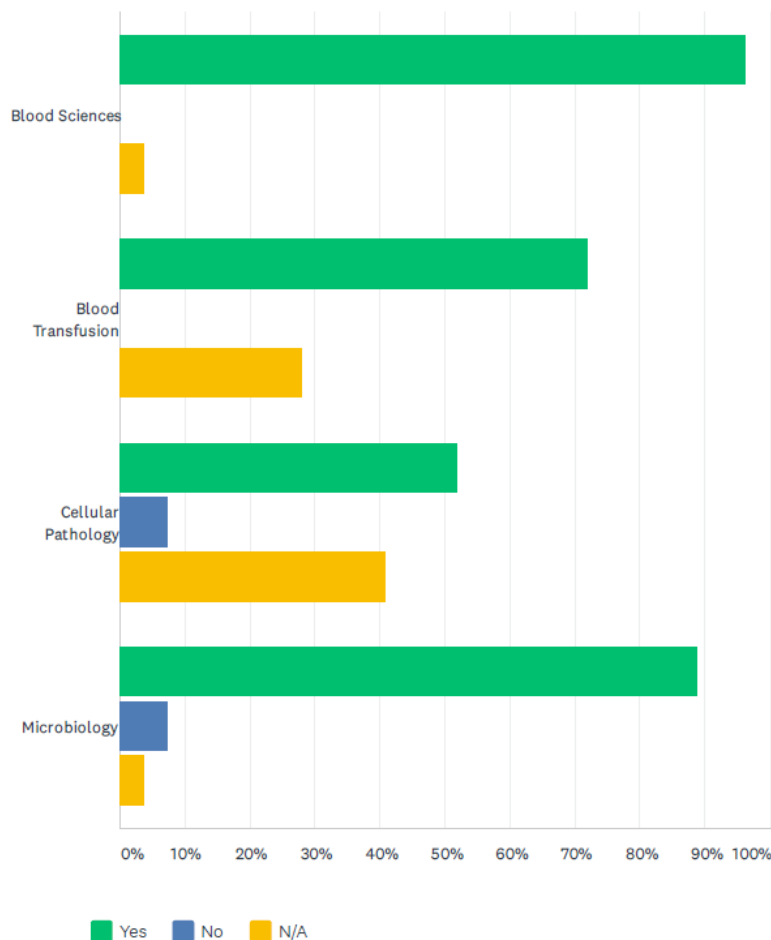


100% of respondents who use the services in normal working hours were satisfied with the advice and availability of assistance provided by Clinical staff. Outside of normal working hours 5% of Cellular Pathology and 5% of Microbiology users were not satisfied with the advice and availability of assistance provided by Clinical staff. Where associated comments were left, responses are detailed in the table below.

Comment	Response
I work part-time. Cannot comment out of hours	Thank you for your comments. We hope that if you do need to speak to any of our laboratory staff that you are satisfied with the usefulness and availability of advice that you receive. Laboratory contact details can be found on the website.
I've not had any call to speak to clinicians other than microbiologists. Unless the question relates to haematologists specifically? They have always been extremely helpful but contacting them is variable.	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. Compliments relating to individual staff members have been fed back to the individual.
Only really have contact with histopathology clinicians. Always helpful.	
As above but generally both on hours and out of hours lab staff very helpful and courteous. I find that if you communicate in a pleasant manner then this is usually reciprocated.	
Often have to ask registrar to contact microbiology consultant on call out of hours to discuss antibiotics. This can be a timely process as the registrar maybe busy with a different deteriorating patient so may not be available immediately. They may not know the patient that we want to be discussed which again delays treating a deteriorating patient. This can be frustrating as ANP's we may be reviewing the most deteriorating patients in the trust, we will have made the clinical decision to commence antibiotics following a clinical review but our job role/ banding limits us to contact OOH on call consultant	Thank you for your comments. We are sorry that you were unable to obtain the information you required, the consultants on-call are often busy being single handed and covering two Trusts, information is also available either on the trust web site, the antimicrobial policy, the MicroGuide App or the Microbiology pages.

Question 15: Are you satisfied with the report turnaround times?

Answered: 27 Skipped: 1



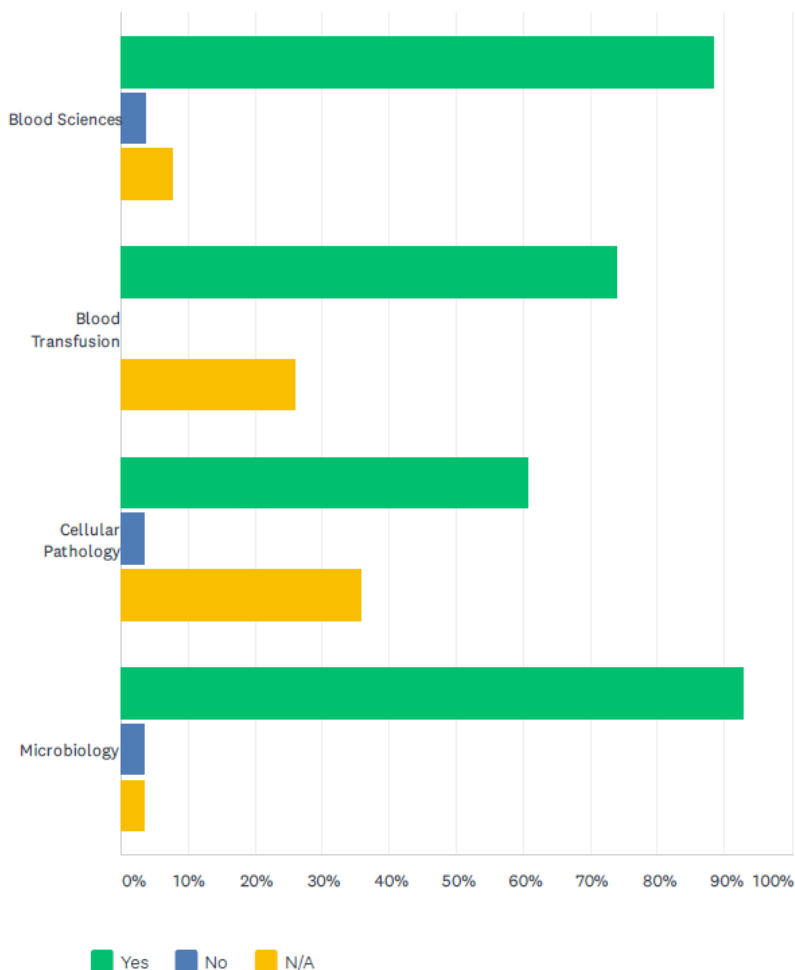
96% of respondents were satisfied with the turn around times for Blood Sciences, 72% of Blood Transfusion, 52% of Cellular Pathology, 89% Microbiology. 7% of Cellular Pathology and Microbiology users were dissatisfied with the report turnaround times. Where associated comments were left, responses are detailed in the table below.

Comment	Response
They can only be returned as quick as the technology allows	Thank you for your comment. We are pleased that you feel our turnaround times are good.
Very fast turnaround	Thank you for your compliment this has been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings.

<p>Sometimes delayed pathology results</p>	<p>Thank you for your feedback.</p> <p>Our test turnaround times are listed on our webpage via the following links: Barnsley: http://www.barnsleyhospital.nhs.uk/pathology/Rotherham: https://www.therotherhamft.nhs.uk/Pathology/Pathology/</p>
<p>Delays in PCRs lead to prolonged treatment with IV antibiotics and repeated IV access required or IM antibiotic treatment</p>	<p>Please contact the laboratory where experienced turnaround times are outside of the stipulated turnaround time and the laboratory will investigate.</p>

Question 16: Are you satisfied with the report content, clarity and interpretive comments?

Answered: 28 Skipped: 0



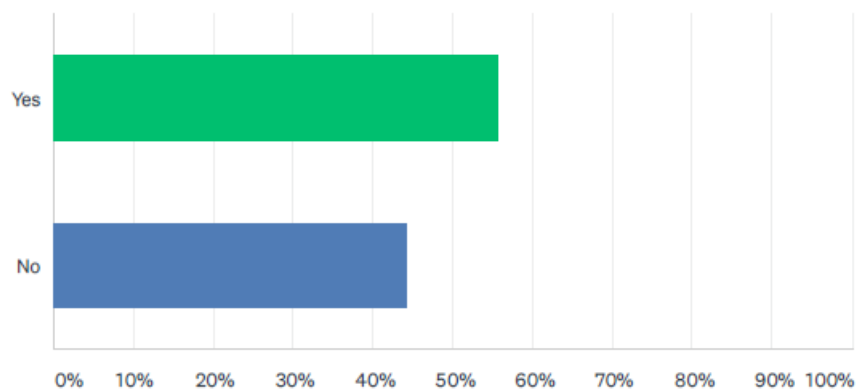
93% of respondents were satisfied with the report content, clarity and interpretive comments in Microbiology, 88% in Blood Sciences, 74% in Blood Transfusion and 61% in Cellular Pathology. 4% of users of Microbiology, Blood Sciences and Cellular Pathology disciplines were not satisfied with the report

contact, clarity and interpretive comments. This is comparable to the 2020 survey. Where associated comments were left, responses are detailed in the table below.

Comment	Response
Please could you start reporting ionised calcium alongside adjusted calcium from serum bloods in severe hypocalcaemia (when $Ca < 1.90$) - would greatly help with directing IV replacement	Whole blood ionised calcium analysis can be analysed on Trust Blood Gas Analysers. It is currently available within SCBU, ITU, and the laboratory but can be set up on other Trust instruments if a clinical need is identified following discussion with the Biochemistry Clinical Scientists. Ionised calcium is not routinely available on serum samples.
Sometimes TOO much info- too many reference ranges Eg for urine micro albumin – becomes confusing when looking through lots of results	Thank you for your comment, we aim to provide succinct, relevant information to aid interpretation of our tests. We will review the comment provided for urine albumin/creatinine ratios.

Question 17: Are you aware of the criteria by which samples are accepted or rejected in Pathology?

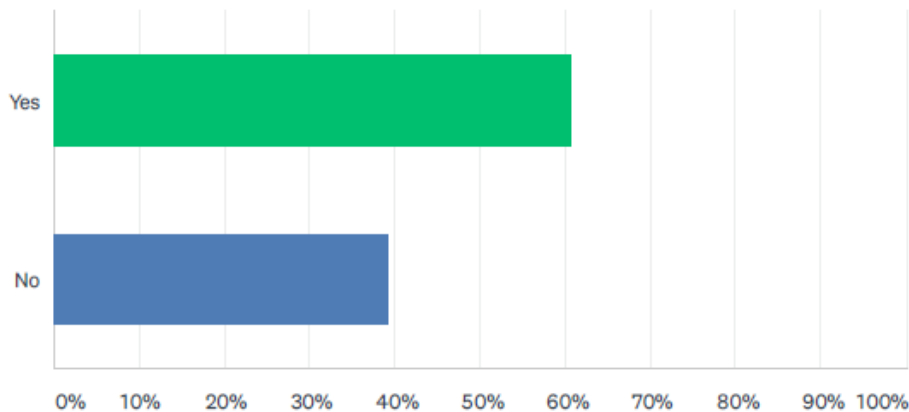
Answered: 27 Skipped: 1



This question was designed to determine the awareness of sample acceptance in Pathology for Blood Sciences, Cellular Pathology and Microbiology and determine the need to provide further education about minimum criteria for sample acceptance. A hyperlink to the Sampling and Request Labelling page of the Pathology Website was included in the survey question to raise awareness of the criteria. 44% of respondents were not aware of the minimum sample acceptance criteria, similar to the 2020 response. Further information has been made available to the clinical areas over the last year, however, it is clear that further education regarding Pathology Sample Acceptance and the rationale for this. Please note that a minimum data set is required to ensure full patient identification in the laboratory. The laboratory receives a large number of samples on a daily basis, and it is paramount that the laboratory ensures full traceability of the sample to the request, and to the patient record.

Question 18: Are you aware of the criteria by which samples are accepted or rejected in Blood Transfusion?

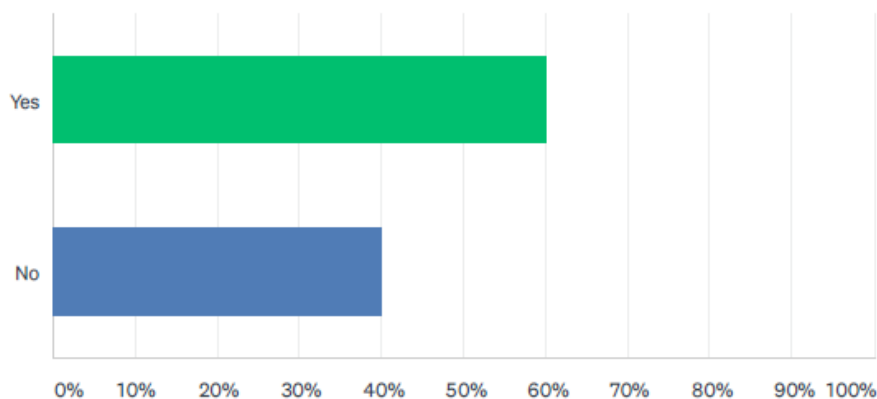
Answered: 28 Skipped: 0



This question was designed to determine the awareness of sample acceptance for Blood Transfusion and determine the need to provide further education about minimum criteria for sample acceptance. A hyperlink to the Sampling and Request Labelling page of the Pathology Website was included in the survey question to raise awareness of the criteria. The sample acceptance criteria for Blood Transfusion is more stringent than for the rest of Pathology due to BSQR requirements. 39% of respondents were not aware of the minimum sample acceptance criteria. Information has been made available to clinical areas via communications, the Pathology Website and Trust inductions, however, this response suggests that further education of clinical staff is required.

Question 19: Is laboratory news and updates communicated effectively?

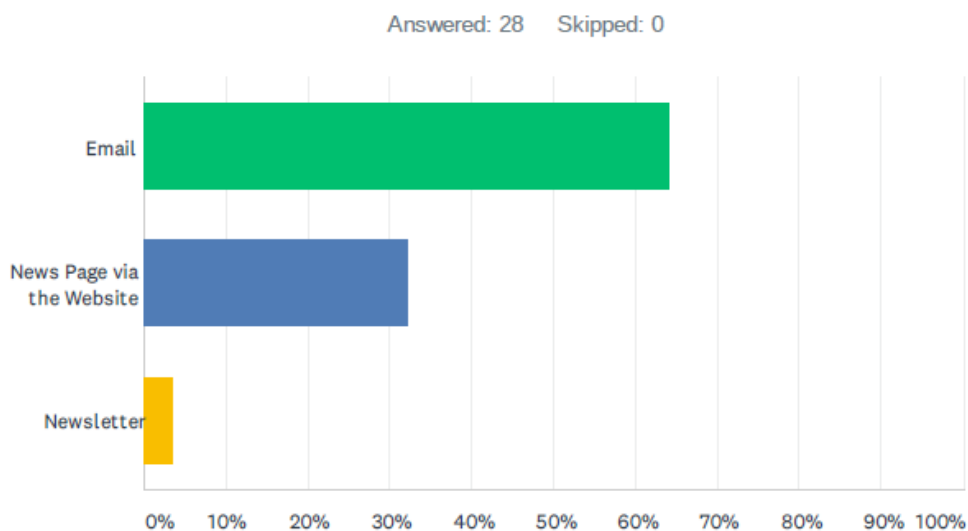
Answered: 25 Skipped: 3



40% of respondents did not feel that laboratory news and updates were communicated effectively. This is an improvement on 2020 where 30% of respondents did not feel that updates were communicated effectively. The laboratory is keen to improve communications to users.

Comment	Response
I don't always think that laboratory problems are communicated to the ED effectively such as when systems are down. Email is not a good way to inform ED who are unable to check them whilst at work and due to the time pressures a phone call to nurse/consultant in charge would be much better.	We endeavour to communicate issues in a timely manner and through appropriate channels. Our policy is that analyser issues that are likely to affect our turn around times are communicated to the Duty manager and ED Consultant working at that time. If the downtime is during routine working hours a communication is sent out through Trust communications.
Not always, we are sometimes unaware that new handwritten request forms are in place ie histology forms so old ones can be removed from the department.	Thank you for your comments. In response to feedback from our users, BRILS have initiated an internal communications group, specifically to review and standardise the communications processes from BRILS and ensure that changes are communicated to all users in a timely and user accessible manner.
Unable to comment	

Question 20: How would you like to receive communications from us?



A majority of respondents (64%) stated that they would rather receive communications from the laboratory via email, 32% via the website and 4% via newsletter. The laboratory is currently investigating setting up a regular email newsletter to users.

Question 21: Do you have any comments to improve the service we provide?

Comment	Response
Very good services Excellent service provided to MDT by all lab staff.	Thank you for your compliment this has been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings.
Well's score should be mandated before requesting a D-Dimer, would be great help in educating DD driven CTPAs.	Thank you for your comment. Introduction of an age-adjusted DDimer result within ED as per a local ED policy has been introduced this year to help reduce unnecessary scans. If you would like to discuss your request further, please contact the Laboratory.
It is important that the FIT test is made available for clinicians to use (currently only requestable if you are in primary care)	This test is provided directly to primary care under the remit of the regional SY&B Cancer Alliance who can be contacted directly at sybndcancer.alliance@nhs.net . Secondary care FIT testing is not currently offered in the region. If there is a clinical need a patient may be referred to their GP or, in special circumstances, the possibility of a kit being sent from the FIT service based in Sheffield can be investigated. Please contact the laboratory if you require more information.
Better communication. Email preferred. perhaps some background info on some of the test and what the results mean could be extended to other tests	Thank you for your comment. In response to feedback from our users, BRILS have initiated an internal communications group, specifically to review and standardise the communications processes from BRILS and ensure that changes are communicated to all users in a timely and user accessible manner.
Please review reference ranges and comments - we just need brief and quick normal/ abnormal mist of the time - further info can the. Be requested	Thank you for your comment, we aim to provide succinct, relevant information to aid interpretation of our tests for a wide range of users. Many of the comments attached to results are to highlight clinically significant requiring the attention of Clinicians. Some have been implemented as part of Datix outcomes or are added due to lack of clinical information provided when requesting the tests. The laboratory has a duty to inform Clinicians of potential matters that may affect the result validity to assist in the patient management. Please do contact the laboratory if there are specific examples you would like to be reviewed.
More regional merging of services would improve 24 hr cover of services	Barnsley Hospital NHS Foundation Trust are working with all neighbouring Trusts to evaluate options identified by NHS improvement on the consolidation of Pathology Services across South Yorkshire and Bassetlaw (SYB). NHSI have proposed a hub and spoke model and the proposal for SYB is centred on Sheffield Teaching Hospitals NHS Foundation Trust (STHFT) as the hub for the surrounding Trusts in Barnsley, Bassetlaw, Doncaster and Rotherham.

Comment	Response
	SYB Pathology services are evaluating this model and a number of other variations with the intent of finding the best solution for patients and clinical users in SYB. South Yorkshire and Bassetlaw Integrated Care System :: Pathology services (frank-digital.co.uk)
Get on site phlebotomy back PLEASE	Thank you for your comment. This was a temporary move to ensure patients and staff are kept as safe as possible by not asking them to come into the hospital environment where there are COVID positive patients and providing the service in an area where the risk is lower. The service has relocated back on site in the Hospital to its previous location as of 12th July 2021.
The less paper request the better. mandatory to acknowledge the results every Dr to request any test under his/her name not under the name of a Dr who perhaps left the trust a decade ago junior Dr should be linked to a supervising consultant, and a consultant should remind the junior if he she falls behind with results acknowledgment	Thank you for your comment. This comment has been fed back to the ICE filing project for consideration.

Question 22: Have you had any positive experiences with the service that you would like to feed back?

Comment	Response
Good and good efficient service	Thank you. The positive results have been fed back to Laboratory Managers to feed back to staff as part of staff meetings. The results have also been passed onto the Pathology Business and Service manager for inclusion in Staff Briefings. Where positive comments are specific to individual staff members/departments, these staff members have been made aware.
Very easy to approach	
The staff is always friendly and helpful.	
Clinicians and technicians always approachable	
Angela Wardle and Jack Casbon in immunology at Rotherham provide a very efficient and helpful service - thank you	
Very happy with services	
Admin staff (secs) always very polite and happy to assist.	
All staff I have spoken to over the years have been helpful and informative, most of them go above and beyond to help us all in MDT. Particular shout out goes to Val Waller, Andrew Hill, Louise Halliwell, Bev, Selina but to be fair everyone offers help and advice when needed.	
Always very helpful over the phone specially for specialized tests that are not done in the trust. Majority of the issues with ICE and requesting are regarding radiology services, but biochem, microbiology, blood bank and pathology are always great in time and assistance	
Many helpful conversations	