# Early Career Tip - Conduct a CAP Lab Inspection

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**Dr. Yasmeen Butt:**

Hi everyone. Welcome to this CAPcast. My name is Dr. Yasmeen Butt. I am an assistant professor at Mayo Clinic in Arizona. I'm a pulmonary pathologist and I've been in practice about five years now. We are going to talk to you today about CAP inspections and I will say that I have never been on an official CAP inspection. So I have together with me today, Dr. Varshney and Dr. Rudzinski.

**Dr. Neha Varshney:**

Hi, my name is Neha Varshney. I'm an assistant professor at University of Mississippi Medical Center. I'm currently a GI and liver pathologist and working for close to two years now. I have been involved in lab inspections for a while, right after I finished my second year and thankfully was a junior member in the accreditation committee where I got more and more involved.

**Dr. Jaclyn Rudzinski:**

Hi everyone, this is Dr. Jaclyn Rudzinski. I am a community practice pathologist in Dallas, Texas, area east of Dallas at Baylor Scott and White Lake Point Medical Center, which is east of Dallas. I have been in practice for five years and my experience to date with doing CAP inspections includes three inspections where I was a team member each time.

**Dr. Yasmeen Butt:**

All right. Thank you so much for joining me today. So why would you even want to be part of a CAP inspection? What would you perceive the benefits to be?

**Dr. Neha Varshney:**

I think it's really important to be a CAP inspector. You learn a lot. I feel like I learned so many things like quality assurance, validation, et cetera, and the things we don't really think about in residency, but which are so important for the optimal patient care. So you learn that. You meet a lot of people, you learn different style of working and honestly, I've incorporated a lot of that in my own practice. So I think it's really important.

**Dr. Yasmeen Butt:**

What kind of qualifications do you need to be involved in a CAP inspection?

**Dr. Jaclyn Rudzinski:**

Alright, I can take this one. So to be a CAP inspector, the qualifications would include being a medical technologist, a clinical laboratory scientist, a lab supervisor or a manager. But importantly for us, both pathologists and pathology residents are able to do CAP inspections.

**Dr. Yasmeen Butt:**

So what should you do beforehand, before you're going to start a CAP inspection? Say it's your first time.

**Dr. Jaclyn Rudzinski:**

I can take this one. So the most important thing that needs to be completed before you go on the inspection, ideally more than a few days ahead of time, is the online CAP inspector training course. And there are different courses depending on whether you're the team lead or if you are the team member. I started as a team member and actually now as a laboratory medical director, I will need to do the team lead inspector training modules, but that's around a four to five hour online course. There is a timeframe for how long that certification lasts and again, you can do it online anytime. That's probably the most important thing beforehand that needs to be completed.

**Dr. Yasmeen Butt:**

Is there a test or a quiz at the end or is it just working your way through the material?

**Dr. Neha Varshney:**

There are questions you have to answer to finish the course. So yeah, there is one.

**Dr. Yasmeen Butt:**

So now we're on a CAP inspection. What does a typical day look like? Is there anything you would recommend you bring with you to the inspection, like checklists or something like that?

**Dr. Neha Varshney:**

So CAP will send you a whole big binder. So it'll have all the testing menu, it'll have discrepancies, it'll have all the checklists there. So it's a good idea to see them all beforehand when you start and then a typical day. It's a long day, so I will suggest everybody to have a good nice breakfast and a lot of coffee. It's a whole day thing for the most part. Sometimes if it's a big institution it's over several days. You should take anything. You need your medications and wear comfortable clothes and just know your checklist really well. That's it.

**Dr. Yasmeen Butt:**

I'm assuming professional dress is the way to go here as if you're going to work. Probably shouldn't show up in jean shorts, right?

**Dr. Neha Varshney:**

Yeah, that would not be acceptable. You should wear nice dress or you should wear a pantsuit or something professional you wear for an interview. But comfortable. I would definitely say don't wear high heels because you're going to walk. You're going to walk a lot.

**Dr. Jaclyn Rudzinski:**

Got it. I would agree with that. I have made that mistake and paid for it. Business casual and above basically.

**Dr. Yasmeen Butt:**

So when you're actually there at the CAP inspection, who are you mostly dealing with? I mean obviously you're going to be talking to medical directors, but do you find yourself speaking to other people like technicians and other consultants and how does that work?

**Dr. Neha Varshney:**

Okay, so you're talking to a lot of people and it depends if you're a team leader or a member. I know we haven't covered that. So the team leader is the main person who's the leading the team. So the team leader is going to talk to the CEO, the CMO, medical directors, et cetera. And everybody else usually talks to the division directors like director of AP or CP and then most of the supervisors, that's the most people you're going to deal with.

**Dr. Jaclyn Rudzinski:**

And I can say kind of a consistent format that I've seen is that when an inspection team arrives on site in the morning, the supervisor or team lead somebody in a leadership role within the section of the lab that's being inspected, gets paired with that one inspector and they're kind of a buddy dyad all day long. And so if going as an inspector you would kind of have that one lab person that you're going to if you need documents to review or examples of compliance, evidence of compliance, there's generally kind of like a pairing that happens too.

**Dr. Yasmeen Butt:**

What would you say the most challenging part of being involved in a CAP inspection has been for you?

**Dr. Neha Varshney:**

For me, the most challenging part is to find time from my schedule, from my work schedule. So that has been the most challenging part. Figuring out the sign on services and frozens and calls when you're not on calls, that has been very challenging. The other thing recently, which I've seen couple I did, it was in very remote places and it was a little challenging to travel. So those were the two things which recently I have been struggling with.

**Dr. Jaclyn Rudzinski:**

And thinking back to my first inspection, I'll say this, I was the least experienced member of my first inspection team going as an inspector. That was the most challenging part of my very first inspection was how many very experienced coworkers that were all techs and supervisors, but they had been on 10 inspections together and they had kind of a clique that went and did these inspections together and I was asked, it was a great experience but I was just very nervous because I was intimidated by their experience.

**Dr. Neha Varshney:**

Last few inspections I've taken residents with me. So every inspection I'll try to take one or two residents with me depending on the size who have not been involved and they have been overwhelmed before and are all stressed out and all nervous and going through checklist and kind of learning them. But when they are there and after it's over, they are really very happy with it. They learned a lot and they want to do more. So I think it's just about getting experience. It's not hard, it's just about kind of have a taste of it sort of.

**Dr. Jaclyn Rudzinski:**

Right. And you know what, as a trainee, all of this is jogging my memory as a trainee. We participated as the trainees in the mock inspections that happened in the interim year between the two year cycle of true CAP inspections, the trainees would participate in the one year lab inspections. I thought that was something my training program did really well because it at least took the edge off going and saying yes. Actually I probably said yes to being an inspector the first time that I was asked with that very experienced team because I knew at least a little bit of what I was getting myself into. So that's a plug.

**Dr. Yasmeen Butt:**

That's the one thing I've done is that interim when I was in residency. Yeah, exactly. Is there anything you wish you knew before you went on your first inspection?

**Dr. Neha Varshney:**

My first inspection, I went like Jackie. I was a second or third year resident where I did not know anything to be honest. I went there, I showed up, I flipped through the checklist, so I felt like I should have been prepared a little bit more, but I had an attending with me who kind of helped me with everything. I feel the other two things which are really important are discrepancies, which the last year's discrepancy or last to last inspection discrepancies. Knowing them and checking them is really super important. Going over their testing menu, a lot of times I've seen the testing menu they're seeing or it's on the website or the CAP checklist is so different from what they actually have. Those are a couple of things if you know what to look at gets easier the time.

**Dr. Jaclyn Rudzinski:**

I agree with that. Kind of just getting familiar with the three different levels. I think there's a zero level now, but there's a phase one, phase two deficiency and what that means and how the lab needs to respond. There's also a corrected onsite option, then the lab has a chance to correct whatever the deficiency would be on the day of the inspection. Really just doing it more times. It's kind of a numbers game. You need some at bats doing this to feel more comfortable. It's going to be uncomfortable no matter what the first time you do it. And then one thing, I think the question was about what you wish you knew, what you wish you knew. Yes. I wish that mindset wise, I understood that the spirit of the CAP inspection was really one of peer exchange of ideas like pathology and lab quality is really about best practices and us kind of learning from each other when we go do these inspections.

In contrast, what it's not supposed to be is you robotically going down a list and checking off every single checklist item, which is exactly what I thought it was supposed to be. And I guess ideally you would do it that way, but there's kind of a broader framework of, do you remember the road ROAD acronym from the CAP inspector training, read, observe, ask, discover. You're supposed to approach the inspection that you're doing as an inspector with curiosity and inquisition. It's not you policing your colleagues' lab. You're supposed to kind of bring your best practices ideas into their space and then see how they're doing things. Be curious and not punitive about what you are giving us feedback. It's a good feedback exercise actually. Right?

**Dr. Neha Varshney:**

Yeah I second that. Sometimes when I'll see a frozen section happening, I'll just go in during inspection and kind of follow it and sometimes I learn things, oh this is really nice, this is really neat. We can probably use this. Or I can say, okay, this is a different way to do it and that's how we do it. And I've seen people changing their practices and us in our department changing our practices too based on that. So it's kind of like a mutual learning process as well.

**Dr. Yasmeen Butt:**

That's really nice that you're able to take things back with you. So it's not just I'm coming to judge you, it's more like I'm coming to talk to you and look at your lab and learn about your lab and maybe share some of our information and then maybe I learned something from you. So it sounds like can be, for the most part, a positive experience. Alright, well thank you so much for your insight in this and hopefully this information we'll have inspired some of you to go do your CAP training and become a CAP inspector. And again, the links, the pertinent links that you need will be as part of the description for this podcast. And thanks for listening.

**Dr. Neha Varshney:**

Thanks. Thank you. Bye everybody. Bye everyone. Bye.