

**STATEMENT OF
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BEFORE THE COMMITTEE ON SCIENCE AND
TECHNOLOGY
SUBCOMMITTEE ON INVESTIGATIONS AND
OVERSIGHT
U.S. HOUSE OF REPRESENTATIVES**

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(616 Words)

Good morning and thank you for the opportunity to appear before you today. My name is Cheryl Wanzie. I am an American Society of Clinical Pathology^{1st S} registered Medical Technologist since 1971. I have been employed with the Department of Veterans Affairs since 1973. In my current position as Chief Medical Technologist, Pathology and Laboratory Medicine at the VA Pittsburgh Healthcare System, I was responsible for overseeing the quality of the

process for clinical testing of samples from VA patients, performed by the Special Pathogens Laboratory (SPL) and ensuring that the laboratory met the standards for laboratory accreditation. I was and am currently responsible for allocating the clinical laboratory supply budget and monitoring associated workload data.

In January 2006, I provided workload and cost data for the SPL to Dr. Mona Melhem, Associate Chief of Staff, Clinical Support Service Line. After reviewing the data and obtaining other information, Dr. Melhem determined that the SPL clinical and environmental testing workload could be performed more efficiently in the clinical microbiology laboratory. Dr. Melhem asked me to facilitate and oversee the transition of the clinical and environmental legionella testing to the main laboratory. In June 2006, Dr. Melhem informed me that the SPL would close in July and that the clinical microbiology laboratory would assume both clinical and environmental legionella testing.

On the morning of July 19, 2006, Dr. Melhem, a VAPHS research scientist and I met with a staff member of the SPL to discuss the transfer of clinical and environmental specimens and clinical laboratory equipment from the SPL to the main laboratory. Dr. Melhem instructed SPL staff to consolidate all clinical and environmental specimens in a clinical refrigerator and specimens belonging to other research scientists in a clinical ultralow freezer which would be moved to the main laboratory that afternoon. SPL staff was also instructed to prepare an inventory of the clinical and environmental specimens, which they never provided. In the afternoon, Dr. Melhem and I supervised the transfer of the equipment and appropriately labeled clinical specimens from the SPL to the main laboratory. At that time, VAPHS research scientists specimens were secured in the ultralow freezer in the main laboratory. The remaining specimens were left in the SPL which closed on July 21, 2006.

In late afternoon of December 4, 2006, Dr. Melhem inquired if there were specimens remaining in the SPL. I

responded that to my knowledge they were still in the SPL. Dr. Melhem informed me that the Medical Center Director considered this to be a concern due to the presence of biohazardous material and directed that the refrigerators and freezers be cleaned out by the end of the day. I assembled some of the Microbiology staff and we proceeded to remove all improperly labeled or uncatalogued specimens from the SPL using standard biohazardous waste protocols. I cautioned the staff to take extra precautions because some of the specimens were uncapped and in broken glass tubes. The specimens were placed in double biohazard bags, removed from the building, placed in biohazard waste containers to be removed from the facility by a contractor.

In my position as Chief Technologist, I had no knowledge of any policies in effect on December 4, 2006 concerning the disposition of research collections. I am now aware of a VAPHS Research Data Security and Privacy Policy which ensures the protection of private information and the disposition of research material.

Thank you, that concludes my statement, I am prepared to answer any questions you may have.