

Clinical Safety & Effectiveness Cohort # 21 Team 5

Ordering Body Fluids for Laboratory Testing



The Team



Division

- Ashley Schutz , MLS (ASCP) CM
- Joy Wortham, MD, Hospitalist
- Stephanie Knight, MSN, RN, CCTN, CVRN

Ancillary Team members

- Jennifer Reed RN
- Norma Pena, MT (ASCP)
- Hazel Lee, RN, EMR
- Michael Shoffeit, MD, Internal Medicine
- Michelle Ogunwole, MD, VA Chief Resident
- Edna Cruz, M.Sc., RN, CPHQ, CPPS

Sponsor Department

- Stephanie Whitehead
- Dr. Emily Volk

BACKGROUND

Body Fluid specimens are sent for laboratory testing to be used as part of the diagnostic process for patients.

Body fluids that are missing or have incorrect orders risk laboratory testing not being performed and/or being delayed and affecting the accuracy of results.

Body fluids often are considered "irretrievable specimens" and are difficult to recollect. Correct ordering is imperative for proper patient care.

What do these errors cost?

Background:

- Hospital-based errors are 8th leading cause of death in US
 - · 1 million injuries
 - 11% patients received potentially harmful care
 - 46% patients didn't receive recommended care
 - 1.5 million preventable adverse drug events
 - 2.4 million extra days of hospitalization
 - Increased hospital costs of \$17 billion
- 75% of clinical lab errors are part of the pre-analytical process

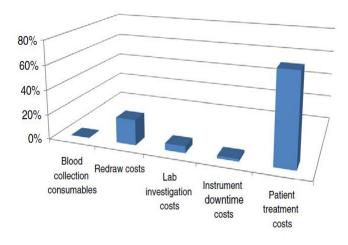


Fig. 2. The total cost of specimen rejection can be quantified by cost category.

Average cost of a preanalytical error: \$208.00

*Up to 1.2% of total hospital operating costs

*Average hospital of 650 beds = approximately \$1,199,122 per year

The most important cost is to the patient

®Delayed or Incomplete testing

Misdiagnosis

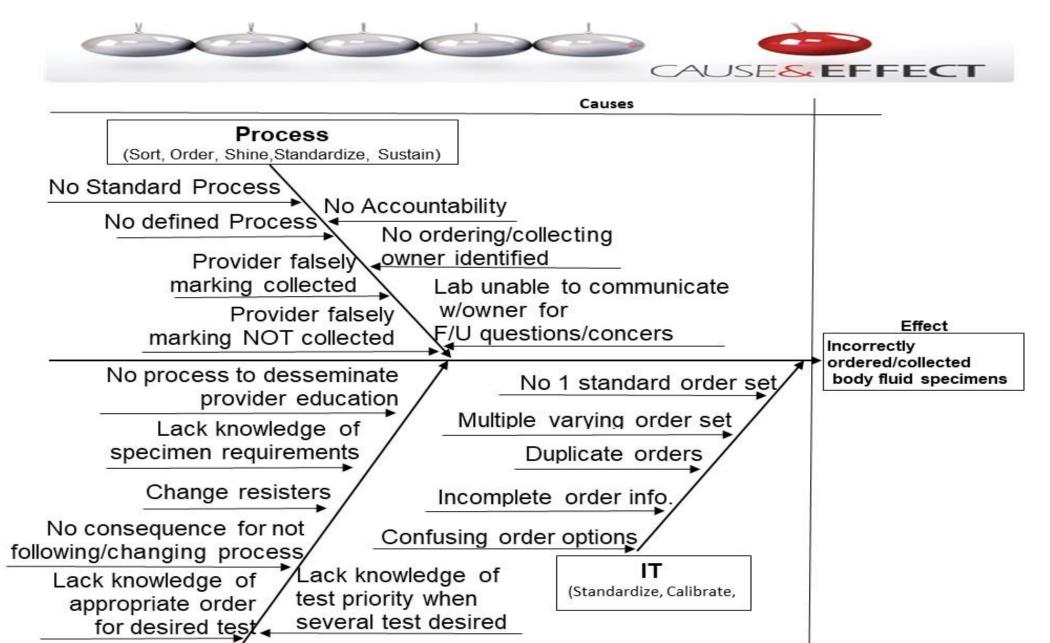
8 Improper treatment

©Repeat procedures



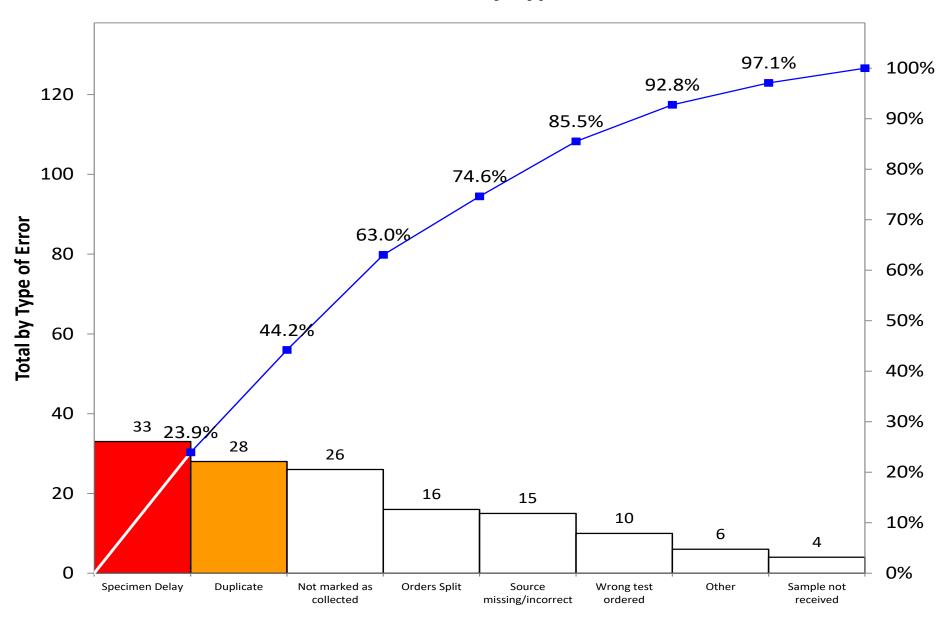
Our Aim Statement

To Decrease the amount of incorrectly ordered and collected body fluid specimens from 75% to 30% by January 5, 2018.

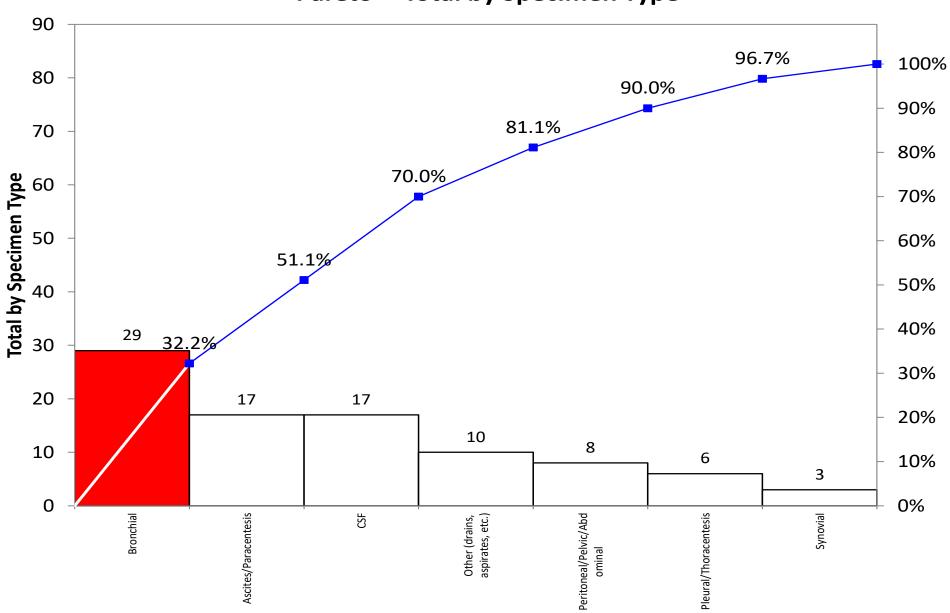


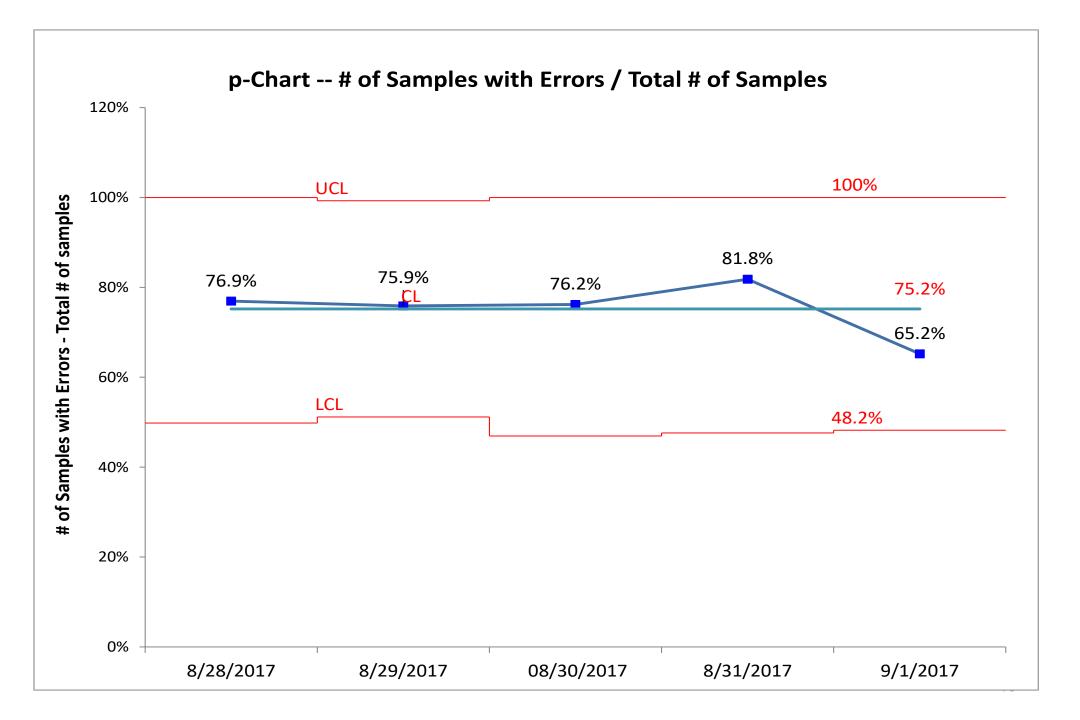
People/Education

Pareto -- Total by Type of Error



Pareto -- Total by Specimen Type





Action Plan

(owner of order sets) to update

sets according to their needs

Reorganize "flow" of ordersets

Determine best format to create

user-friendly ordering processes

Review changes in test-system to

Follow-up with general medicine

Gather post-implementation data

Go-Live with new order sets

Submit changes to IT via

adjust accordingly

and take next steps

after Go-Live

footprints

Why?

(Choose one)

Standardize, Correct, Simplify

Standardize

Standardize

Correct & Simplify Flow

Correct & Simplify Flow

Correct & Simplify Flow

Correct & Simplify Flow

Standardize

Standardize

Correct & Simplify Flow

Standardize

Correct & Simplify Flow

Team & Dr. Michael Shoffeit

Team & Norma Pena

Team & Norma Pena

Norma Pena / IT

Ashley Schutz

Team & Internal Medicine

Team & Internal Medicine

Start Date

8/25/2017

9/17/2017

10/30/2017

10/31/2017

10/31/2017

11/7/2017

Not Started

Not Started

Not Started

Not Started

Action fall			9111
Action Strength	Action Driver (Taken from Flow,	Action	Who?
	Fishbone or Pareto)		
Strong	IPareto by Frror & Specimen type	Gather pre-implementation data to categorize error types	Ashley Schutz
Strong	Standardize the Process	Assess current order sets available in Sunrise	Team & Norma Pena
		Meet with Internal Medicine	

Standardize the Process

step

sets

Process fails to proceed next

Reduce multiple, varying,

duplicative, incomplete,

Reduce multiple, varying,

duplicative, incomplete,

Create Accountability of order

Create Accountability of order

sets Address change resisters

Reduce error types on Pareto

confusing order sets

confusing order sets

Change Resisters

Strong

Strong

Strong

Strong

Strong

Strong

Strong

Strong

Proposed New Orders

- All order sets standardized to be organized by performing laboratory department with most commonly ordered tests pre-checked and appearing in bold at the top of the category they belong to.
- Body Fluid Cell Count & Body Fluid Path Review merged into 1 order to avoid confusion of ordering the path review instead of cytology.
- Procedural Order sets now will have auto-populated sources.

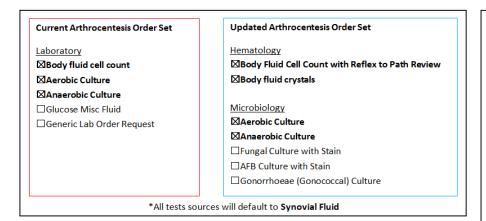
Current Paracentesis Order Set Updated Paracentesis Order Set Routine Hematology ⊠Body fluid cell count ☑Body Fluid Cell Count with Reflex to Path Review ⊠Albumin Miscellaneous fluid Cytology ☐Cytology, Non Gynecologic ☐ Body fluid pathology review □ Protein Total Misc fluid □ AFB Stain ☐ Protein Total Misc Fluid ☐ AFB Culture with Stain ☐Amylase Miscellaneous fluid Associated Serum ☐Bilirubin Total Misc Fluid ☐ Amylase Misc fluid ☐Triglyceride Misc Fluid ☐Bilirubin Total Misc Fluid □CEA Miscellaneous Fluid □ Cytology Microbiology ☐Albumin Serum ⊠Aerobic Culture ⊠Anaerobic Culture ☐ Fungal Culture with Stain ☐ AFB Culture with Stain Other □Albumin Serum *All tests sources will default to Ascites Fluid

Current inoracentesis Order Set	Opuateu Moracentesis Order Set		
Routine	Hematology		
☑Body fluid cell count	☑Body Fluid Cell Count with Reflex to Path Review		
☑Aerobic Culture	☐Hematocrit Misc Fluid		
☑Protein Total Misc fluid			
☑LDH Misc Fluid	Cytology		
☐Glucose Misc Fluid	□Cytology, Non Gynecologic		
<u>Other</u>	Chemistry		
☐Body fluid pathology review	☑Protein Total Misc fluid		
□Cytology	⊠LDH Misc Fluid		
☐Amylase Misc fluid	⊠Glucose Misc Fluid		
☐Blood Gas Arterial	□Albumin Miscellaneous fluid		
☐Triglyceride Misc Fluid	☐Amylase Miscellaneous fluid		
☐Adenosine Deaminase, Pleural Fl	☐Triglyceride Misc Fluid		
☐Anti-Nuclear Antibody	☐Cholesterol Miscellaneous Fluid		
☐Hematocrit Misc Fluid			
	Microbiology		
Associated Serum Studies	☑Aerobic Culture		
□ Protein Total Misc fluid	☑Anaerobic Culture		
☐LDH Misc Fluid	☐Fungal Culture with Stain		
	☐AFB Culture with Stain		
	<u>Other</u>		
	☐Anti-Nuclear Antibody		
	☐Adenosine Deaminase, Pleural Fluid		
	□pH by Meter Misc Fluid Panel		
	☐ Protein Total Serum		
	□LDH Serum		
*All tests sources will default to Pleural Fluid			

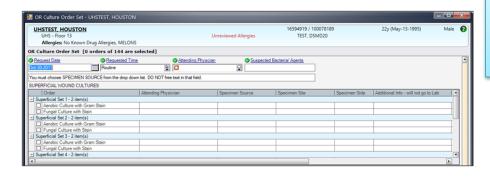
Undated Thoracontosis Order Set

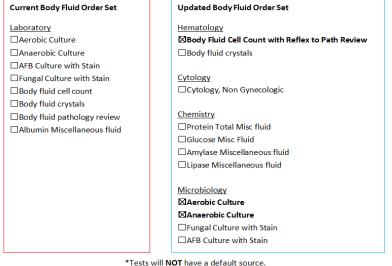
- Missing tests added: based on procedural needs
- Alternate tests used: example: pH misc fluid instead of blood gas arterial

Proposed New Orders



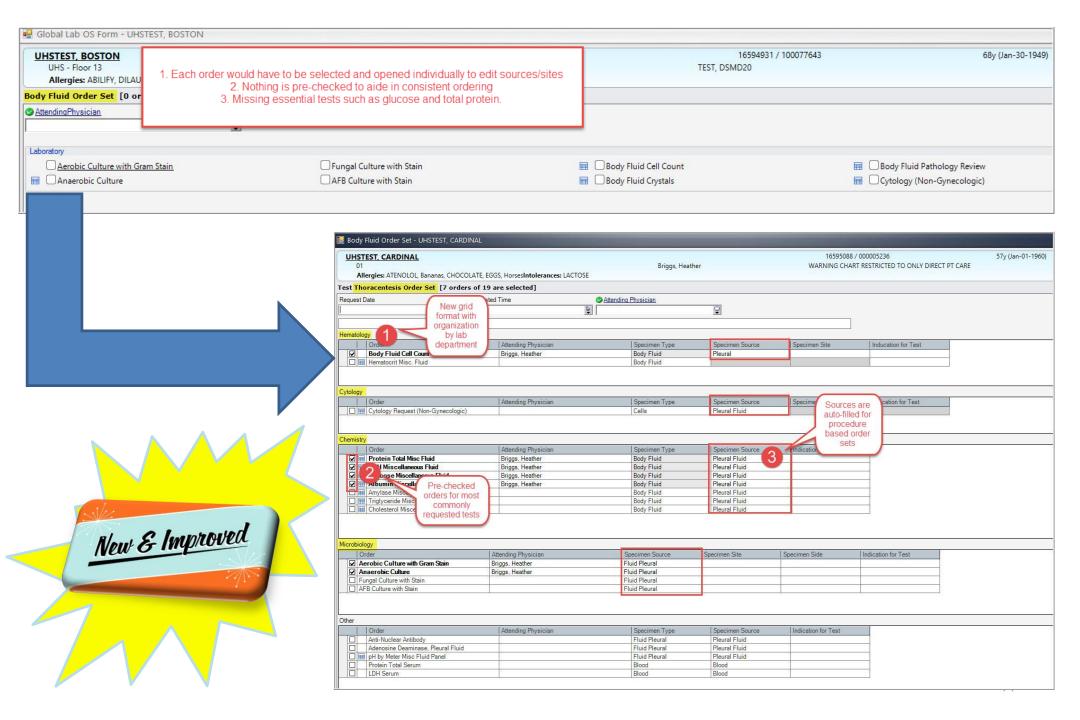
- New tests updated to be available to order: Gonorrhoeae
- Generic BF order set updated to include more options and organized



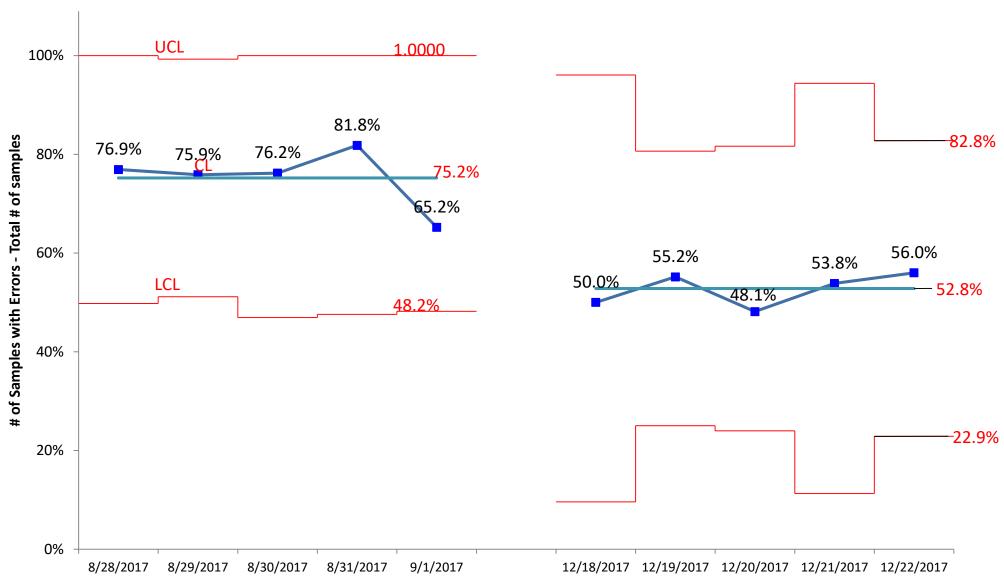


- Current order sets all have different formatting
- All will be updated to "grid" format
- No more pop-up windows to fill out individual orders

STANDARDIZATIO N



Pre/Post Intervention p-Chart -- # of Samples with Errors / Total # of Samples



Return on Investment (cont.)

Pre-Implementation: University Health System
Average of 18.2 body fluid samples with errors per day 18.2 errors x \$208.00 = \$3785.60 per day \$3785.60 x 365 days per year = \$1,381,744 per year

Post-Implementation: University Health System
Average of 10.8 body fluid samples with errors per day 10.8 errors x \$208.00 = \$2,246.40 per day \$2,246.40 x 365 days per year = \$819,936 per year

By reducing our errors from 75% to 53% we were able to see a ROI

\$561,808

Maintaining the Gains

- Continue to monitor number of errors
 - Monthly for the next 6 months
 - Every 3 months for the next year
- Reconvene with internal medicine team to gather feedback on the usefulness of the new order sets and adjust as needed
- Follow up with other errors that are still occurring
 - Delays in Transport
 - Not marking specimens as collected



Next Steps



- 1. Create "dummy order" for cytology orders
- 2. Work with Endoscopy (Pulmonary) to reduce the amount of errors related to bronchial specimens
- 3. Focus on collection and transport errors that were not resolved with the order sets
- 4. Begin evaluating other non-body fluid order sets and processes

