

Reducing clotting screen tests in the Critical Care Unit at Dumfries and Galloway Royal Infirmary

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Background

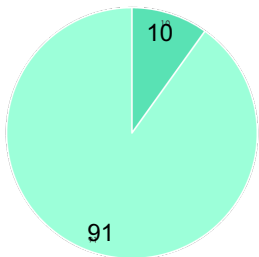
There has been a drive in recent years to use resources more effectively. The Choosing Wisely Campaign found that 48% of routine ICU blood tests were normal [1]. Reduction of routine testing has shown no adverse patient outcomes, less iatrogenic anaemia and lower overall costs associated with patient stay [2].

Aim

To reduce unnecessary clotting screens in the Critical Care Unit in DGRI by 40% by 1 May 2024.

Baseline data

During a period of 12 days observation only 10/101 clotting screens were judged to have been appropriate.



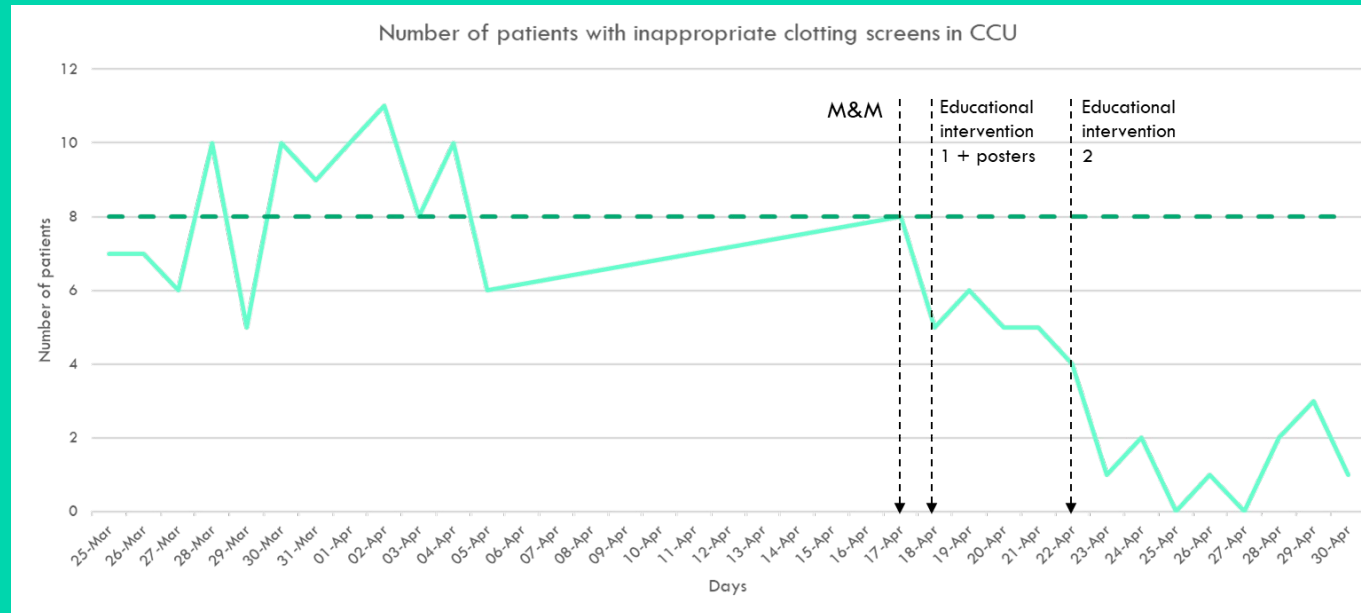
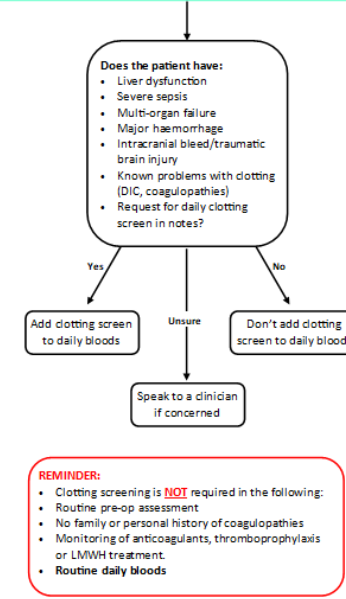
■ Appropriate ■ Routine/inappropriate

"This project has helped to influence the decision to consider for all tests: is this clinically indicated?"

Results

The aim was achieved, with a **reduction of 46% of inappropriate clotting screening tests in CCU**. In addition, the project demonstrated a significant reduction in overall clotting screens ordered in CCU (47%) as well as an increase in the choice to exclude them (12% to 59%).

Clotting Screen—is it needed?



Method

- Creation of process map - to understand where I could best make an impact.
- Contacted the consultants in the CCU for a consensus on clotting screen necessity
- Spoke to nursing team for their thoughts and ideas
- Gathered initial data
- Cost analysis performed

Interventions

- Presented at M&M meeting on 17/04
- Two educational interventions with the nurses, who added the information to their daily huddles
- Creation and implementation of posters in the bloods and handover rooms.

Unexpected positives

- Nursing team excited by project and did not need convincing. With their help the project really took off and has sparked change ideas regarding other blood tests in the department.

References

- [1]<https://doi.org/10.4266/acc.2018.00052>
[2]<http://DOI:10.1097/CCM.00000000000005852>