

LMBP™

Call for Unpublished Quality Improvement Project Data Submissions
**Improving Utilization of Coagulation Testing for Screening Pre-surgical,
Emergency Department or ICU Patients**

Currently we are accepting data on coagulation testing practices for screening pre-surgical, emergency department, and ICU patients when not indicated by patient history or clinical condition.

Do you have any data from projects that quantitatively assess the effectiveness of interventions for improving utilization of coagulation testing for pre-surgical, emergency department and ICU patients? If yes, this is an opportunity to share your data.

More information on the practices and outcomes of interest is provided below. Please contact Christopher Layfield (LayfieldC@battelle.org) with questions or for additional information.

We are looking for evidence comparing the effectiveness of any of the below practices with an earlier or alternative practice (pretest-posttest evidence in the same setting, case-control, randomized designs, etc.). If you have data or have done a quality improvement study and have effectiveness evidence (positive, negative, or no change) we are interested in your results.

Practices of interest are:

- Multidisciplinary order guidelines/algorithms
- Administrative and/or computerized restrictions
- Increased knowledge/access to patient history

LMBP™ Quality Issue/Gap
<p>Coagulation Testing</p> <p>Coagulation testing is a common practice for screening patients in pre-surgical, ICU, and emergency department settings, although they are medically indicated by patient history, comorbidity, or surgery type in less than 30% of cases¹. Unnecessary coagulation testing of patients can result in delays in surgery, unnecessary treatment or additional testing^{2, 3}.</p>

¹ Auble TE, Taylor DM, Hsu EB, Yealy DM. Evaluation of guidelines for ordering prothrombin and partial thromboplastin times. Acad Emerg Med, 2002; 9(6):567-74.

² Amukele TK, Baird GS, Chandler CL. Reducing the use of coagulation test panels. Blood Coagul Fibronolysis, 2011; 22(8):688-95.

³ St. Clair CM, et al. Adherence to evidence-based guidelines for preoperative testing in women undergoing gynecological surgery. Obstet Gynecol, 2010; 116(3):694-700.

Review Question	
What practices are effective for reducing unnecessary coagulation testing for screening pre-surgical, emergency department, and ICU patients?	
Practices	Descriptions
Multidisciplinary order guidelines/algorithms	Consensus guidelines and/or order algorithms for coagulation test ordering created with input from a multidisciplinary team representing all stakeholders.
Administrative and/or computerized restrictions	Adoption of any administrative restrictions intended to reduce unnecessary coagulation screening tests, e.g., <ul style="list-style-type: none"> • Computerized Physician Order Entry (CPOE)/specific order forms with ordering restrictions based on facility’s guidelines • Coagulation test ordering restrictions based on patient’s conditions • Removal of coagulation tests from routine order sets replacing with requirements to order individual tests
Increased knowledge/access to patient history	Addition of required patient history questionnaire and physician review or physician-patient interview.
Associated Outcome Measures	Outcome Definitions
Unnecessary coagulation test orders based on patient history or clinical condition	Number of coagulation test orders during the time period that are not indicated by patient history or clinical condition and the total number of coagulation screening tests ordered for both old and new practice.
Adverse events for patients without coagulation tests	Number of patients requiring unanticipated medical intervention or an unanticipated adverse event (bleeding or thrombotic) and total number of patients without a coagulation test for both old and new practice.
Adverse events for patients with coagulation tests	Number of patients requiring unanticipated medical intervention or an unanticipated adverse event (bleeding or thrombotic) and total number of patients with a coagulation test for both old and new practice.

If you have questions about data submissions or problems during data submission, please contact us at 404-460-1446 or at futurelabmedicine@battelle.org.