

Discontinuation of Shared Lab Specimens

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BACKGROUND

Analytical tests are tests performed by the lab that are ordered by providers and needed for patient diagnosis and treatment. Individual specimens shared between the Surgical Pathology and Microbiology Labs for testing is a pre-analytical error that leads to delayed, repeated, and canceled analytical tests.

This results in lost revenue for the hospital (original and repeat procedures at no cost) and an increase in Safety Intelligence (SI) events that result in Patient Harm. In Fiscal Year 2021 (FY21), there were a total of 13 SI events with varying levels of patient harm. In order to reduce the number of SI events and increase the quality of patient outcomes (target of 80% reduction), we identified these areas of opportunity:

- 1) Discontinue the practice of sharing one specimen between the Surgical Pathology and Microbiology Labs
- 2) Education for providers, nurse managers, and lab team staff on minimum specimen requirements.

PROJECT AIM

The aim is to prove that implementing proactive interventions to prevent the sharing of one specimen between the Surgical Pathology and Microbiology labs will reduce the number of Safety Intelligence Events and Patient Outcomes of Harm by 80% by the 1st Quarter of 2022.



- ✓ Radiology Team Members that deliver specimens were given orientation and walk-throughs of all lab locations and the proper procedure for filling out the new form **Updated Radiology Tracking Sheet**

Chief of Staff Communication

Chief of Staff Message: Reminder - Lab Specimen Handling & Submission
Due to ongoing issues with specimen handling that has resulted in significant concerns with high quality patient care, please review the following reminder:

All specimens submitted for processing in the IVC laboratory must be properly labeled, packaged, and routed to ensure timely diagnosis and treatment. To address these important causes of preanalytical error, laboratory staff will be consistently applying IVC policies on specimen identification and rejection. Only properly submitted specimens will be processed. No sharing of tissue specimens between histology and microbiology or between cytology and microbiology will be permitted. Tissue for microbial culture must be sampled in the procedure area and submitted separately from tissue for histology or samples for cytology. The ordering physician, nurse, or procedure area staff member will be contacted to come to the lab and fix any specimen submission issues prior to processing. We ask that staff members ensure that specimen submission issues are addressed in a timely manner to preserve specimen integrity and avoid unnecessary delays or repeat diagnostic procedures. Nursing and support staff have been encouraged to seek any necessary educational or IT support that they deem necessary to maintain compliance. Procedure time-out and other safe communication practices should be encouraged.

To ensure timely processing of our patient samples, please double check that the specimen is submitted with the following:
Correct orders within EPIC
Separate container with properly affixed label for each specimen
Correct label type (microbiology label, histology label, etc.)
Two unique patient identifiers
Tracking sheet with appropriate destination lab designation
Routed to appropriate lab destination

We are thankful for your continued cooperation and support of the laboratory staff as we work to improve our systemic culture of safety and maintain CAHQ and CLIA-regulated operations. Please direct any questions or concerns related to specimen integrity to Gina Murray, Director of Surgical Pathology (744-5911) gmurray@ecu.edu

Shannon Tyler, MD
Chief of Staff

PROJECT DESIGN/STRATEGY

Process Measures:

1. Enforce Specimen Rejection Policy for single specimens with tests for both the Surgical Pathology and Microbiology Labs
2. Implement Provider, Nurse, and Team Member Education (i.e. Chief of Staff Memo, Beaker Tip Sheets, Updated Tracking Sheets)
3. Enforce Labeling Requirements (i.e. Specific Lab Name and Test)

Outcome Measures:

(Related to Shared Surgical Pathology and Microbiology Specimens)

1. Decreased Safety Intelligence and Patient Harm Events by 80% (1st Qtr '22)
2. Decreased Repeated Procedures at no cost by 80% (1st Qtr '22)
3. Decreased Missed Tests by 80% (1st Qtr '22)
4. Decreased Misrouted specimens by 80% (1st Qtr '22)

CHANGES MADE (PDSA CYCLES)

What Changed (PDSA Cycles)

Plan:

Education provided to Providers, Nurse Managers, and Lab Team Members

Do:

Update Tracking Sheets and Implement Beaker Tips

Study:

Decrease Safety Intelligence (SI) and Patient Harm Events related to a shared specimen between Surgical Pathology and Microbiology

Act:

Continuous education and observation as specimens are rejected. New employee orientation in all procedure and lab areas.

LESSONS LEARNED

The goal to decreasing the number of SI and Patient Harm Events by 80% was exceeded

- Interventions and education supported the successful Discontinuation of Shared Specimens Split between the Surgical Pathology and Microbiology Labs and has yielded zero-related SI and Patient Harm Events.

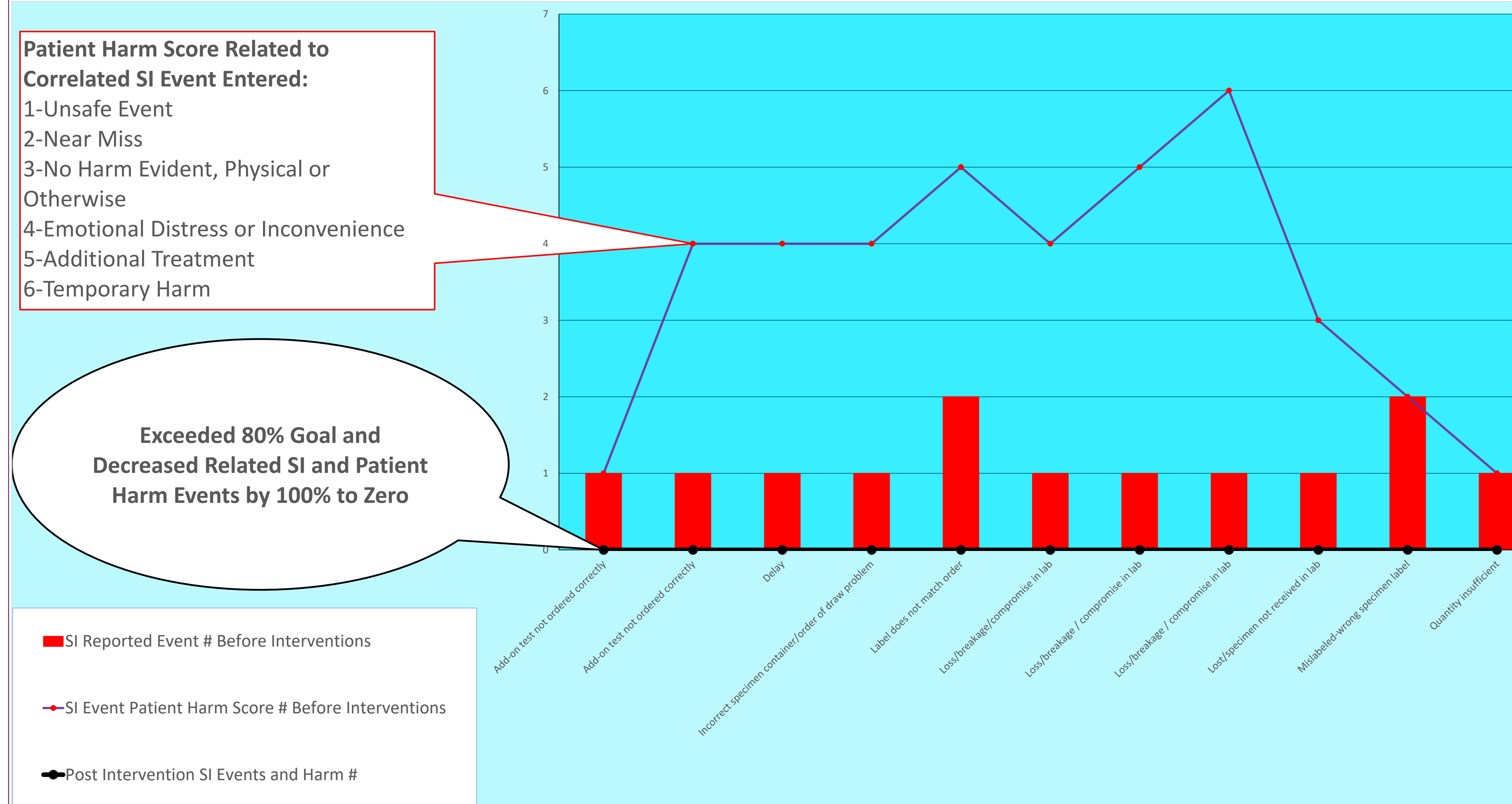
NEXT STEPS

Monitor, Continue Education, and Retraining

1. Continue to monitor all SI Events that are related to specimen sharing that result in harm to patients
2. Educate providers and team members about proper specimen submission and order entry
3. Assist specimen submission areas with training/retraining of team members as needed

RESULTS/OUTCOMES

Graphing Data of SI Events and Related Patient Harm Score Before and After Interventions
Before: 7/1/2020-6/30/2021 After: 7/1/2021-2/8/2022



ACKNOWLEDGEMENTS

Teamwork across the different disciplinary teams made this a successful implementation – ECU Health team members and affiliates. We are very proud to be affiliated with Providers, Nurses, Technicians, and Staff that VALUE our Patient Outcomes!

A special thanks to Dr. Gina Murray, Surgical Pathology Director of Service and Angela Lewis-Sorsby, Histology Supervisor for their support and collaboration to help make these positive changes possible.

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