

Abstract 10

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Title: Reduction of Heart Catheterizations in the CPC Population - A Process Improvement Initiative

Background:

ORMC is an accredited Chest Pain Center with the Society of Cardiovascular Patient Care. Metrics are the backbone in which we are able to derive opportunities of improvement in patient care. Over the past two years the ORMC CPC has tracked many metrics, one of which is the number of heart catheterizations in our CPC population. **PURPOSE:** To decrease the overall heart catheterization rate in the Chest Pain Center Population. **PROBLEM:** A rapid cycle test revealed that there may be some correlation of false positive stress tests to the increasing number of heart catheterizations.

Methods:

A retrospective data analysis was conducted to include a 12 month overview of how many patients underwent imaging on the camera with attenuation correction (DIGIRAD XACT), versus the one without (SYMBIA).

Results:

The data revealed that those patients that were imaged under the camera with attenuation correction versus those that were not, resulted in a correlation of the number of false positive stress tests. These false positive stress tests then resulted in a patient having a heart catheterization. Of these heart catheterizations only 1-2 per month resulted in the need for intervention. Overall in 2013 the highest catheterization rate was 25.5%. In 2014 the highest catheterization rate was 7.7%, which is a significant decrease. The decrease in the heart catheterization rate was attributed to streamlining a process where all CPC patients were imaged under the DIGIRAD XACT with attenuation correction. **COST SAVINGS:** 300 accounts of patients who underwent a straight forward cardiac catheterization were analyzed for direct cost. The direct cost for each procedure amounts to \$1545.00. Of the 300, 126 patients had false positive stress tests leading to cardiac catheterization. This calculates to \$194,670.00 of the expenses. This is a cost that ORMC would have saved by avoiding false positive stress test results and consequent unnecessary performance of cardiac catheterizations.

Conclusion:

In 2013, 38% was the highest percentage imaged on the DIGIRAD XACT where as in 2014 the highest percentage imaged on the DIGIRAD XACT was 96%. The significant increase in using the DIGIRAD exact correlated with the significant decrease of heart catheterizations at 7.7% from 25.5%.