Ready, Set, Collaborate!

A Multidisciplinary Approach to Emergent Interventional Radiology Response Time Reduction

GEORGIA QUALITY IMPROVEMENT PROGRAM

The Challenge

- Updated 2022 Standard for emergent IR
- Lengthy turnaround times
  - 2022 Data:
    - **110 cases**
    - **Median total TAT = 130.5 min**
    - **4% were ≤ 60 min**
- Lack of efficient coordination
- Need for improved communication
- Need for additional resources
- Lack of standardized process
- Lack of activation criteria

The Solutions

- Multidisciplinary Task Force
- Guideline revision
- Updated activation criteria
- Creation of consult order
- Standardized request notification process
- Biweekly case review
- Process breakdown to measure times in each phase of care
- MTC RN remains with patient in IR
- Transport vent allocated to remain in IR
- Q12hr Anes machine checks for 24/7 readiness
- Cross-training of in-house after-hours Rad staff
- Enhanced MTC RN timeline documentation
- Early groin prep
- 24/7 in-house IR RN coverage
- Guideline revision for Anesthesia notification

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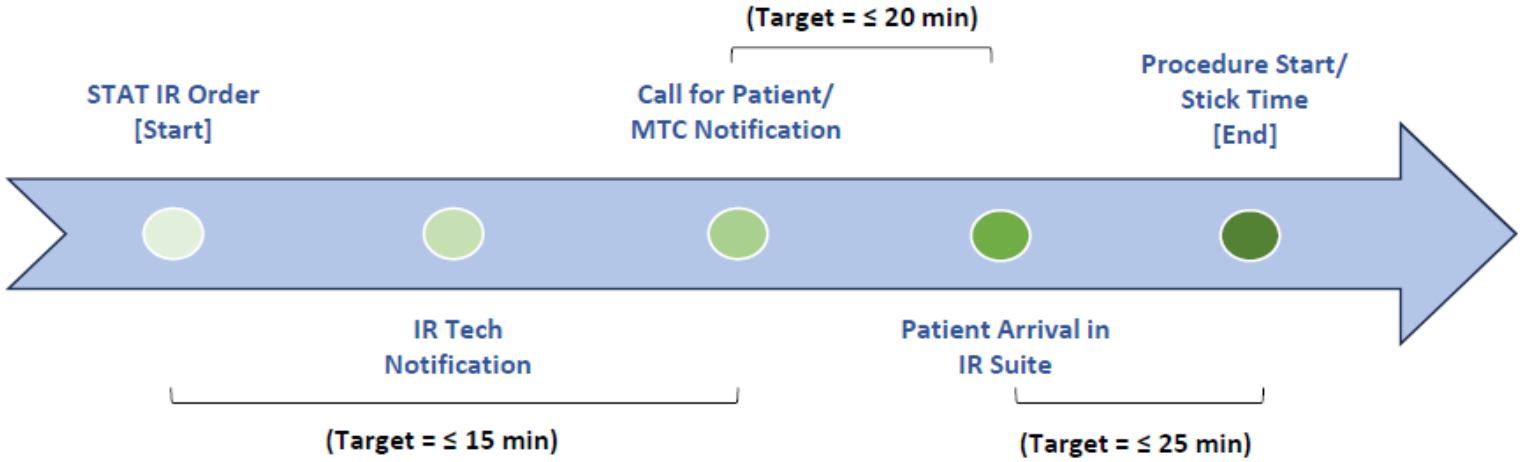
GMH STAT IR Process Reference Tool

GEORGIA QUALITY IMPROVEMENT PROGRAM

Grady

GMH STAT IR Pathway: Goal ≤ 60 min

Purpose: To meet CD 4.15 from "Resources for the Optimal Care of the Injured Patient, 2022 Standards" by the American College of Surgeons Committee on Trauma Verification Review Committee. CD 4.15 states "Level I and II trauma centers must have the necessary human and physical resources continuously available so that an endovascular or interventional radiology procedure for hemorrhage control can begin within 60 minutes of request."



2022 ACS Requirement = ≥ 80% Compliance

*Applies to following Trauma patients:

- Grade IV/V splenic injuries
- </= 24 hrs of arrival, require blood products </= 4 hrs of arrival, AND one of the following:
  - » Active extravasation - liver, spleen, kidneys (Grade III or IV), pelvis (open book or unstable)
  - » REBOA warranting intervention
  - » Intraop consult for traumatic hemorrhage
- ACS Attending Discretion

Equate the process to a multi-departmental relay race...the more time you save before "passing the baton," the more successful we are as a team!

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2023 STAT IR Metrics

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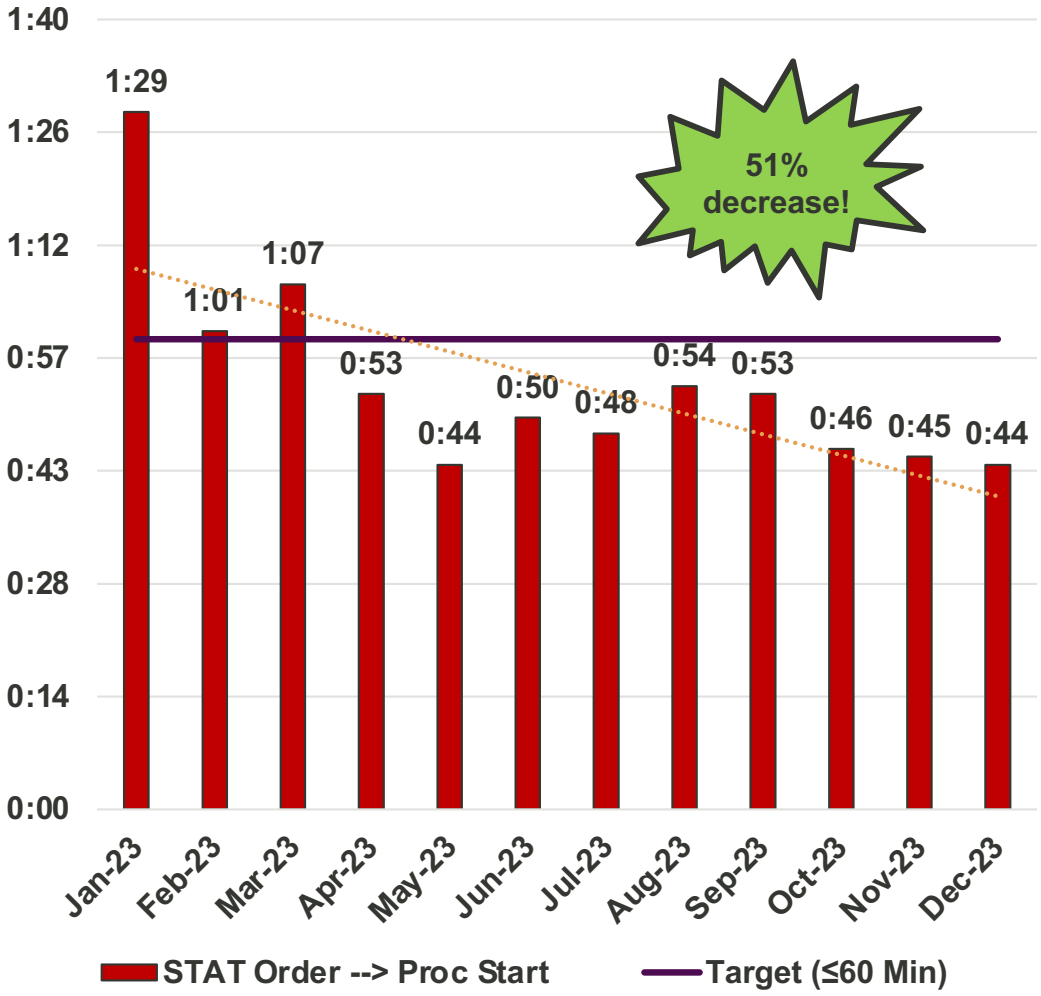
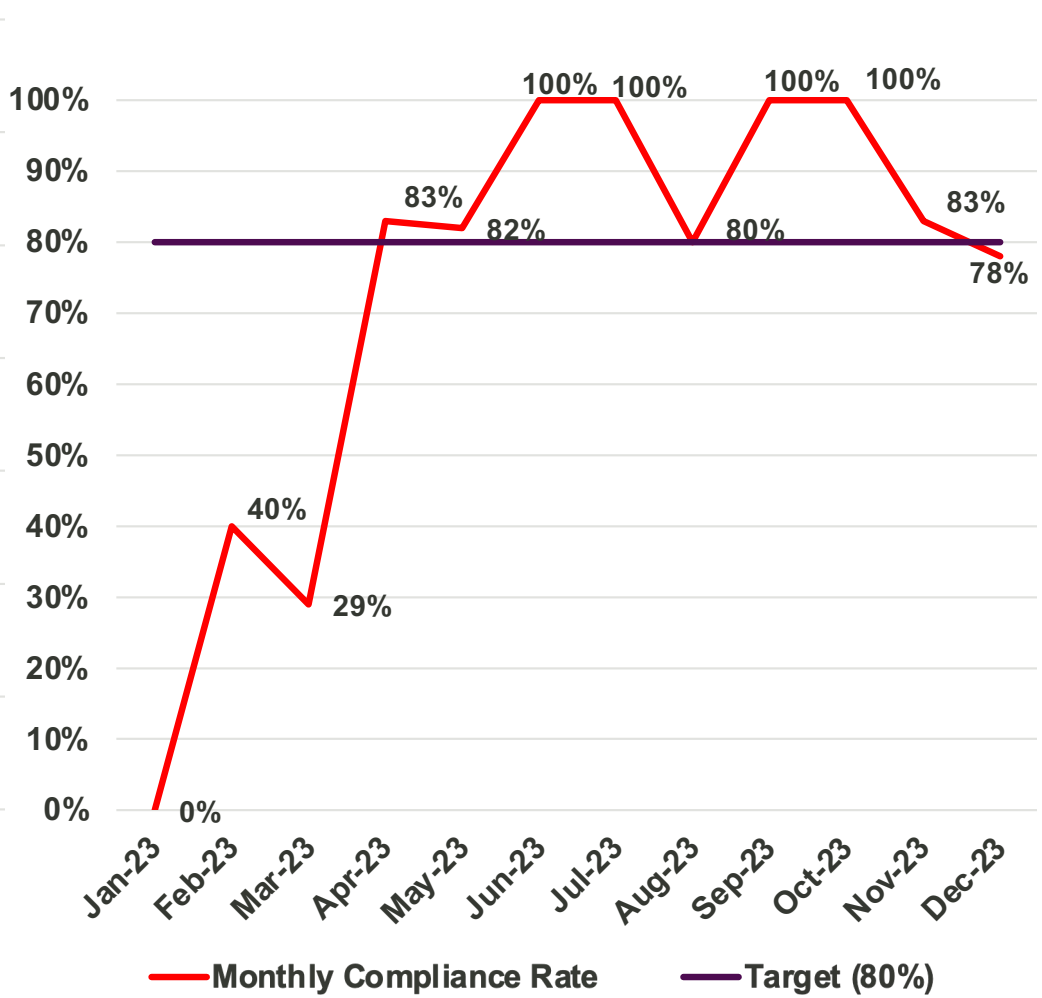
Median Turnaround Times



Monthly Compliance



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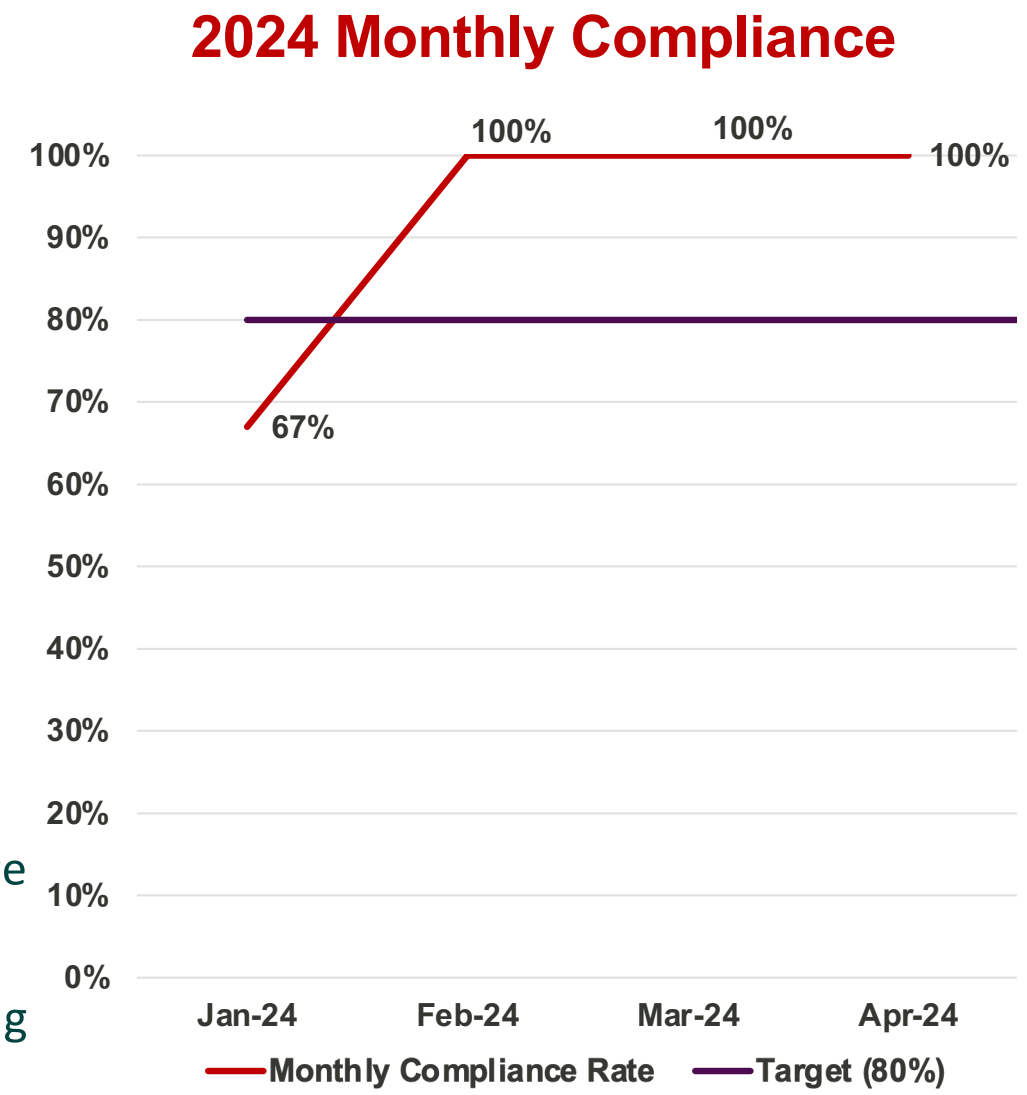
Sustaining the Change

GEORGIA QUALITY IMPROVEMENT PROGRAM

- Biweekly concurrent case review
- Relay race mindset - “pass the baton”
- Ongoing multidisciplinary collaboration
- Recognition of department/staff success
- Monthly TOPIC standing report
- Visual pathway tool for frontline staff
- Ongoing department-specific staff education
- Prioritization of life vs. limb
- Continued after-hours IR staffing analysis
- Enforcement of 30-minute call-back time
- Portable timers to maintain awareness
- Future Grady-specific call pool for IR coverage
- Custom data element registry fields
- Addition of STAT IR secondary review meeting



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