

Transurethral Resection of Bladder Tumor Report Clinical Pathway

Clinical Pathway 4th Quarter Report 2017

Data Collection Period: 01 October 2017 - 31 December 2017

Units using the clinical pathway: PACU, DSU & A3

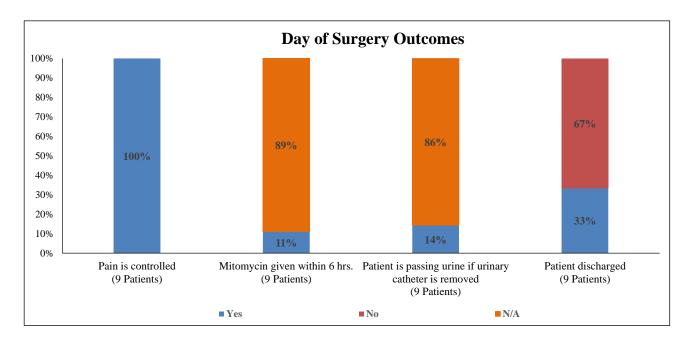
Data Sources: Retrospective review of clinical pathway forms

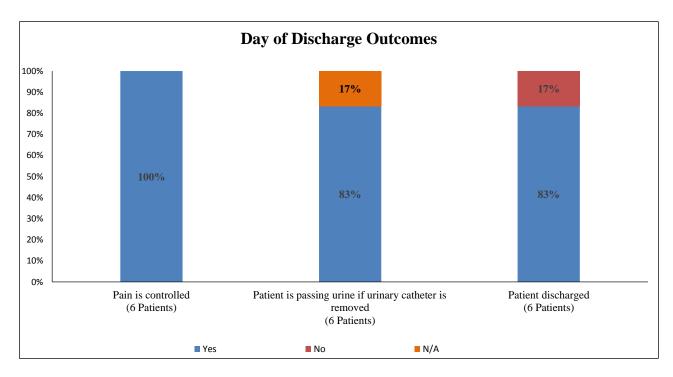
Number of patients who were eligible to be put on the clinical pathway in DSU is: 7 Number of patients managed on the clinical pathway in DSU is: 3 (Utilization is **43%**) Number of patients who were eligible to be put on the clinical pathway in A3 is: 19 Number of patients managed on the clinical pathway in A3 is: 6 (Utilization is **32%**)

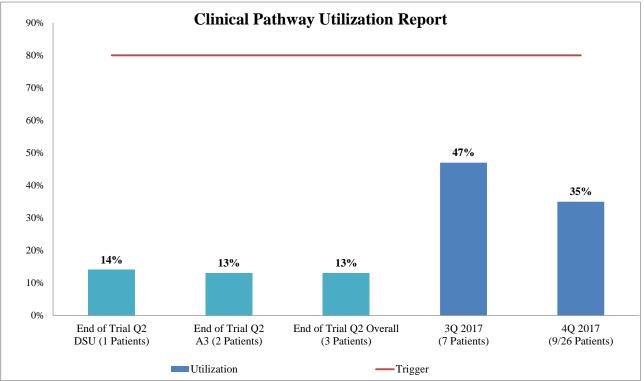
The documentation compliance on the clinical pathway per discipline in the table below:

| Discipline | No. of Patients | Complete Documentation | Incomplete Documentation |
|----------------|-----------------|---------------------------|--------------------------|
| Medical Doctor | 9 | 20% | 80% |
| PACU Nurse | 9 | 80% | 20% |
| DSU Nurse | 3 | 67% | 33% |
| A3 Nurse | 6 | 72% | 28% |

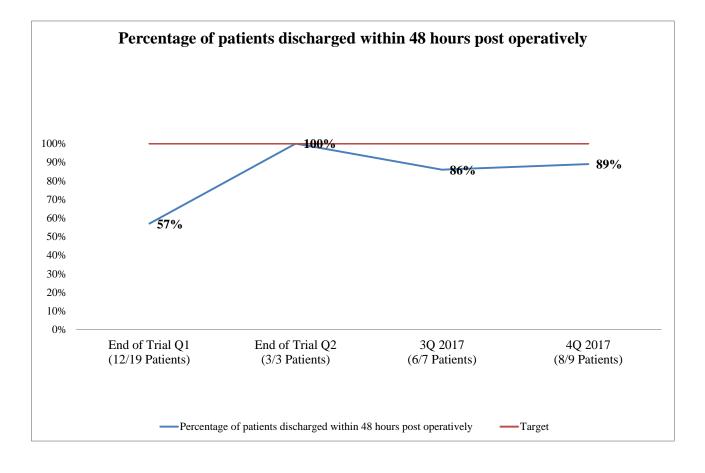
The clinical pathway outcomes are illustrated in the following graphs:

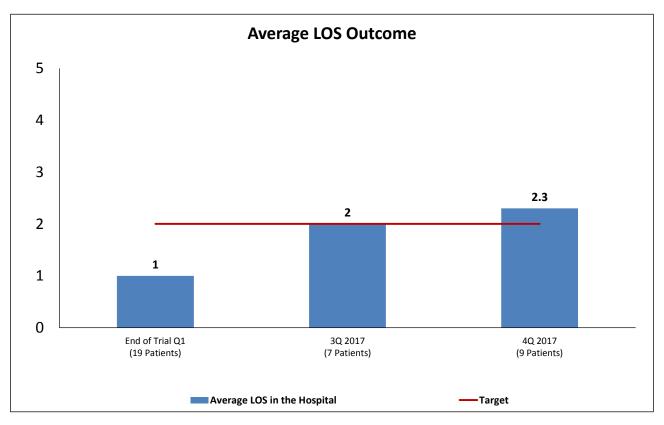












Measures:

The ultimate outcome measure for this clinical pathway is to discharge patients within 48 hours post operatively.

Findings:

1. 89% Patients (n = 8) were discharged within 48 hours post operatively.

2. The average LOS for all patients put on the clinical pathway was 2 Days

3. One patient had Hematuria post op; thus discharge was delayed.

Measures:

The clinical pathway utilization trigger is $\ge 80\%$

Findings:

The bar chart illustrate the followings:

The overall utilization of this pathway is <u>below</u> the trigger. (U%=35%)

Action Plan:

1. The report to be shared with the respective Healthcare Provider/ Medical Quality Director / Clinical Pathway Coordinator)

2. The Clinical Pathway Coordinator to encouraged healthcare providers to utilize the clinical pathway nurse champion as a resource for any clarifications during the clinical pathway coordinator monthly rounds.

3. In-Services will be provided to the units where the Clinical Pathway is implemented to improve documentation and utilization.

4. The clinical pathway author team will be soon working on the automation of this clinical pathway.

Recommendations:

All end-user disciplines need to improve the documentation and utilization compliance.