



## Transurethral Resection of Bladder Tumor Report Clinical Pathway

Clinical Pathway 3rd Quarter Report 2018

Data Collection Period: 01 July 2018 - 30 September 2018

Units using the clinical pathway: PACU, DSU & A3

Data Sources: Retrospective review of clinical pathway forms

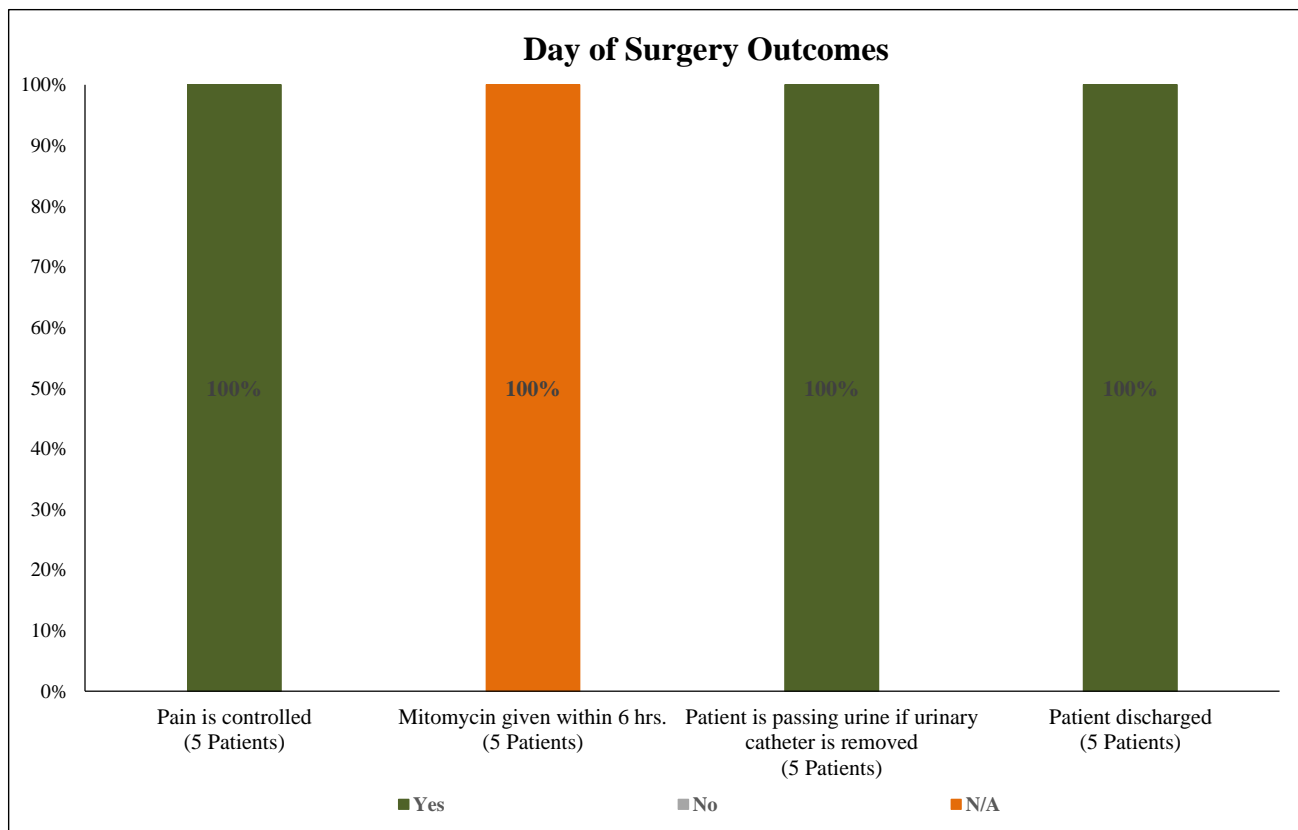
Number of patients who were eligible to be put on the clinical pathway in DSU is: 5.

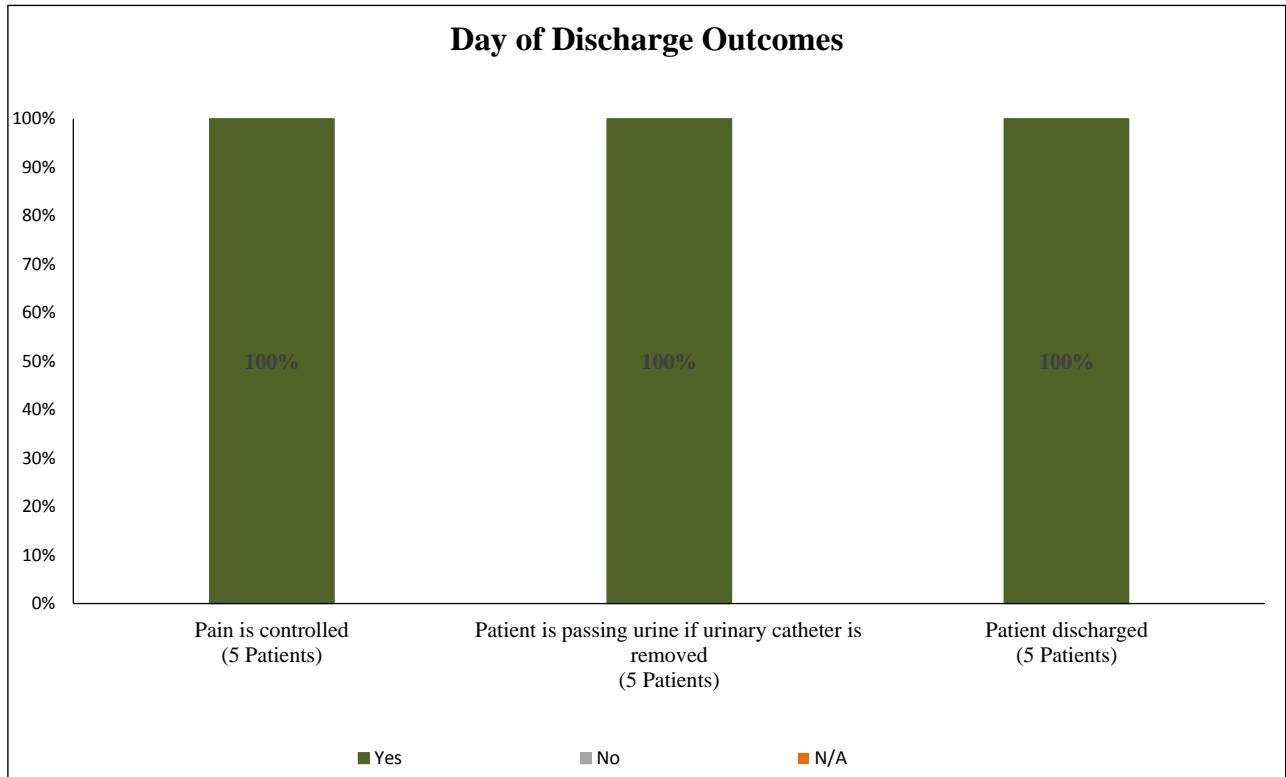
Number of patients managed on the clinical pathway in DSU is: 5 (Utilization is **100 %**)

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

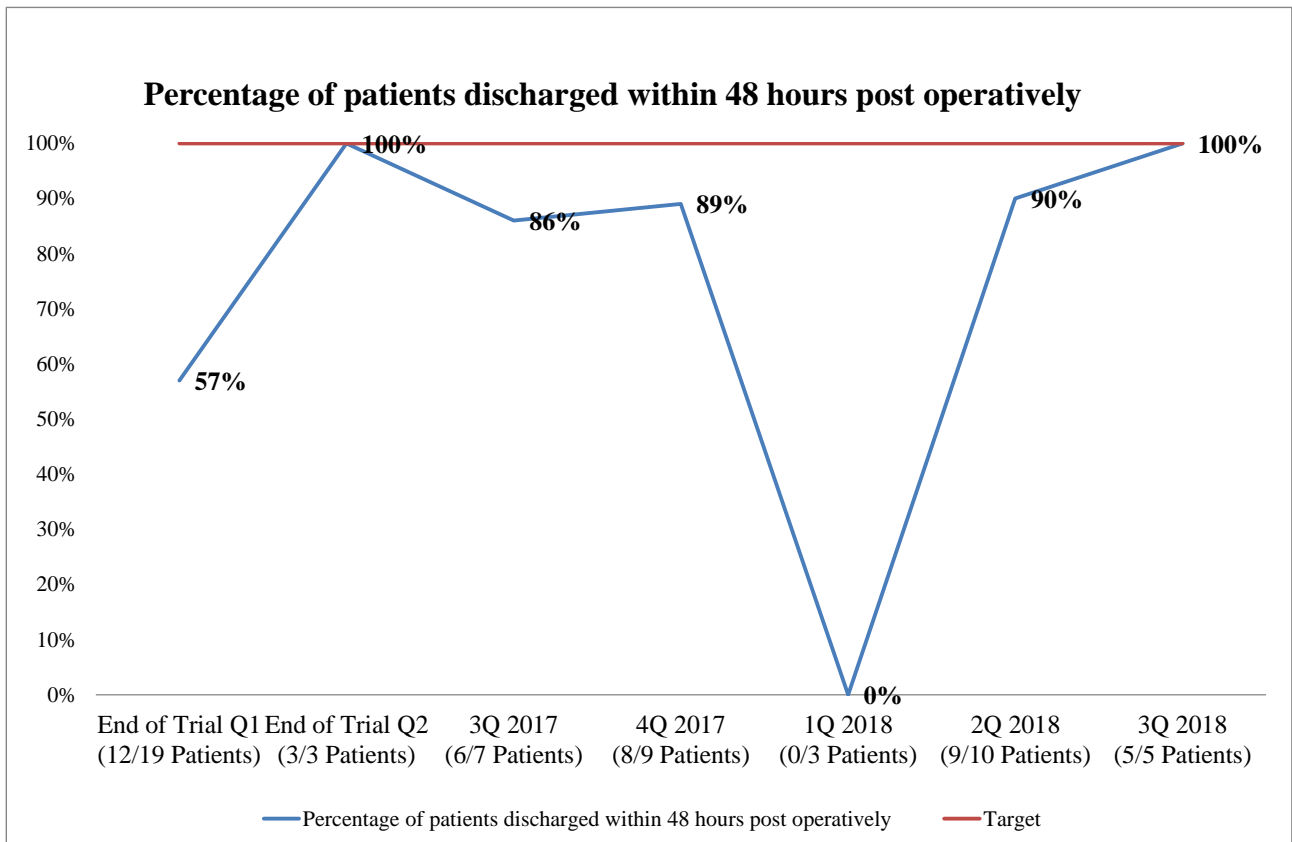
Discipline	No. of Patients	Complete Documentation	Incomplete Documentation
Medical Doctor	5	40%	60%
DSU Nurse	5	90%	10%

**The clinical pathway outcomes are illustrated in the following graphs:**

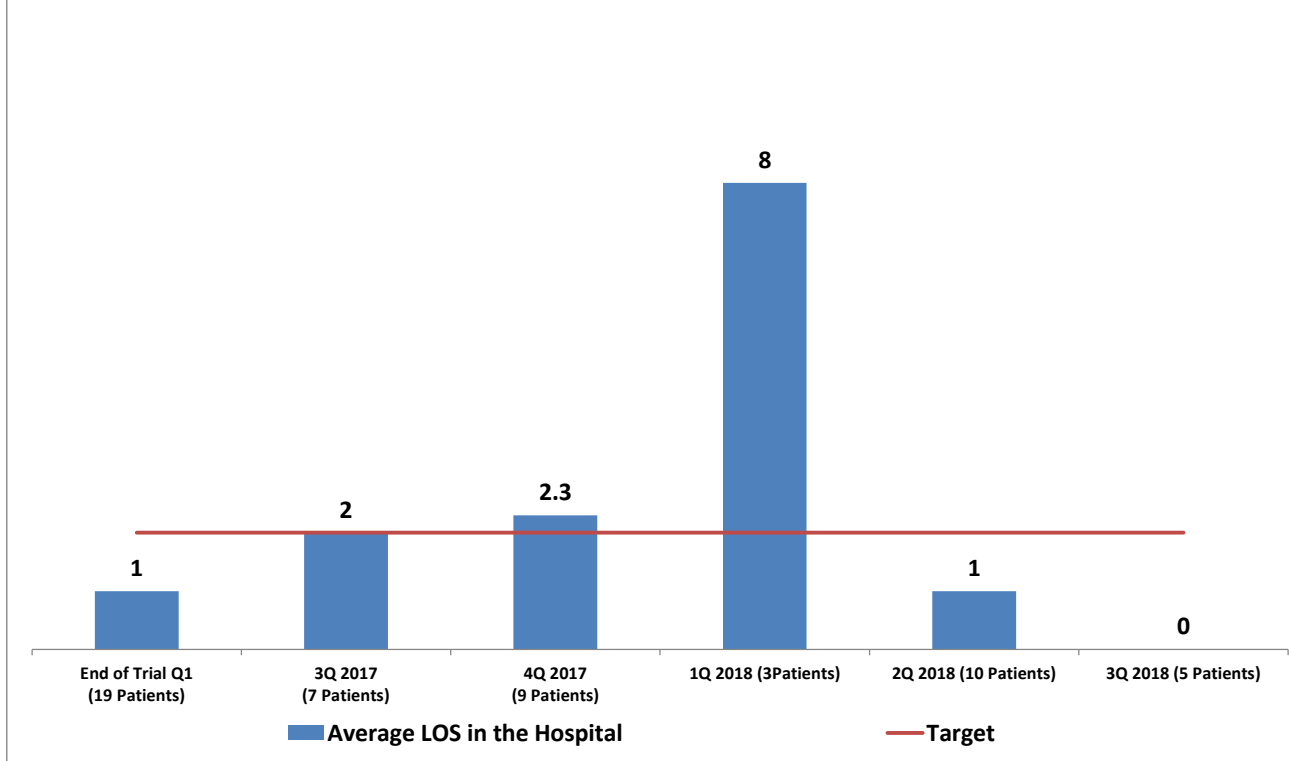




**No patients were not discharged within 48 hrs.**



## Length of Stay for TURBT Patients



### Measures:

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

### Findings:

1. All patients were managed as DSU patients, none of them needed admission
2. The average LOS for all patients put on the clinical pathway was 0 Day.
3. The clinical pathway utilization is 100%

### The bar chart illustrate the followings:

The overall utilization of this pathway is excellent the trigger. (U%=100%)

### Action Plan:

1. The report to be shared with the respective Healthcare Provider/ Medical Quality Director / Clinical Pathway Coordinator)
2. Encourage 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 converted to power plan once the automation is validated

### Recommendations:

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