

All Committed to Improve 2018 Performance Improvement Project Charter

Strategic Priority: SP3- Organizational Sustainability

Project Name	
Renal Profile result availability for CT and MRI Outpatients requiring IV contrast media administration	
	Department
	Ambulatory Care Nursing , Radiology Department
04-15-2018	10-30-2018
10	
ed?	Aims: What will the project achieve?
spital journey, decreasing the ogy for CT / MRI his project was duce patient rough educating	To decrease the number of outpatient arrived for CT and MRI appointment without renal profile results within 3 month by 25 % from baseline (3864 patients) by October 2018.
ement outcome?	Quality Domain: Which of the domains of healthcare quality does this project support? (Select only one) Efficient
	Targets: Expected outcomes
sults	25 % decrease from baseline
	Project Start Dat 04-15-2018 ed? ties to improve spital journey, decreasing the ogy for CT / MRI his project was educe patient grough educating enal profile result ement outcome?

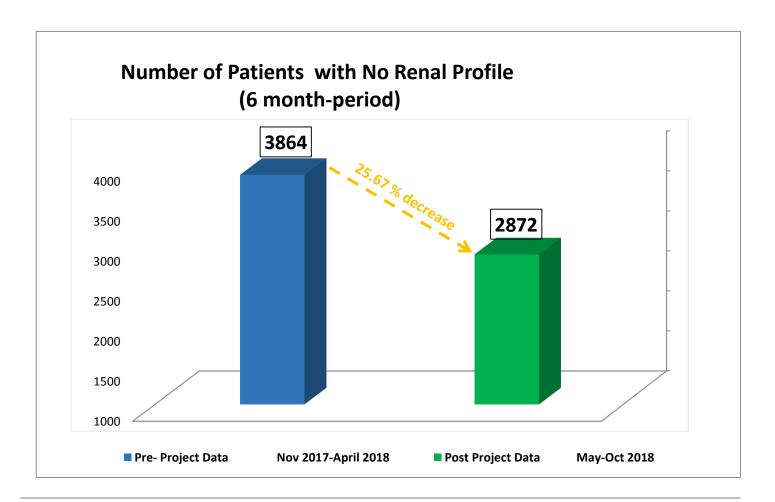
Interventions: Overview of key steps/work completed

Action plan to work on:

- Collect Data.
- Educate the clinic staff on the importance of renal profile result availability on the day of the exam.

Results: Insert relevant graphs and charts to illustrate improvement pre and post project (Insert relevant graphs, data, charts, etc.)

25 .67 % decreases from baseline, Issue discussed during Radiology Operational review meeting and MCA meeting in order to facilitate the compliance of clinics to ensure patient coming to radiology have a valid renal profile result.



Project Lead

Names

(persons involved in project) Hanadi El Zein, Radiology Head Nurse, ACN

Team Members

Names

(persons involved in project)

Kathleen Resonable, Radiology AHN, ACN CT/ MRI Nursing Staff, Radiology, ACN Manhal Al Qurashi, Radiology QA