



**Project Name**

Decrease the number of Hemolized sample in Department of Emergency Medicine (DEM).

**Site**

Jeddah

**Department**

Department of Emergency Medicine

**Project Status**

Completed

**Project Start Date**

01-01-2018

**Project End Date**

06-01-2018

**Problem:** Why the project was needed?

Increased number of Hemolized samples resulted in increased patient waiting time in Emergency, increased length of stay (LOS), decreased patient satisfaction, delay in patient care management, increase nurse workload and lead repetitive work.

**Aims:** What will the project achieve?

To reduce the number of Hemolized sample by 20% by June 2018 (2017 4<sup>th</sup> quarter showed a total number of 85 Hemolized sample)

**Benefits/Impact:** What is the improvement outcome?

(check all that apply)

- Contained or reduced costs
- Improved productivity
- Improved work process
- Improved cycle time
- Increased customer satisfaction
- Other (please explain)  
Click or tap here to enter text.

**Quality Domain:** Which of the domains of healthcare quality does this project support?

(Select only one)

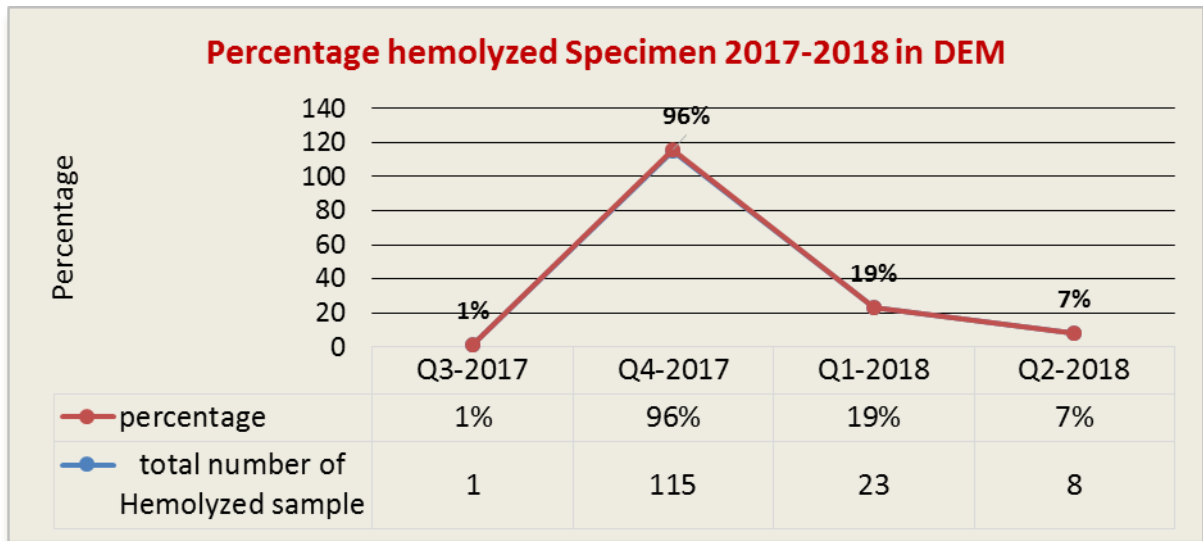
**Efficient**

**Interventions:** Overview of key steps/work completed:

According to the above contributing factors the team in DEM works on controllable factors in collaboration with Laboratory department which include.

- Nurses who have high number of Hemolized sample was involved in root cause analysis and action plan.
- Practice check-off for each staff nurse in DEM to ensure the correct steps are followed by trained Peer reviewer.
- Staff instructed to do gentle tube shaking and avoid the vigorous mixing.
- Root cause related to processing and analysis was shared with laboratory quality coordinator.
- Order of draw and mixing guideline card (from BD Company through laboratory) was placed on each blood collection trolley. See Figure 2
- Preventative action:
  - Educate the nurses on the evidence based steps on blood collection and site selection
  - Quarterly regular schedule In-services for all DEM staff includes both teams, discussing all the factors contribute of hemolysis during sample collection, handling and transportation and how to prevent it, and update the education material if needed by SNI core group.
  - Monthly data reviewed, analyzed with change in recommendation to support the project.
  - Assessment tool (checklist) was designed by the SNI to check off the nurses on right process of blood drawn sample, and added to Departmental orientation for the new nurse.
  - Feedback on the result discussed on quarterly bases with DEM staff to assess the progress of the PI project

**Results:**



**Project Lead**

**Name**

Anaam Khatatbeh

**Team Members**

**Names**

Nour Al Attas (QM Facilitator)  
Wadea Beheri  
Marwa Abid -  
Taghreed Jilan  
Sarfinaz Hanbazaza  
Khalaf Al-Zyod  
Amirah Al Amri  
Hanan Abu ASidah  
Mahmoud Shanaah  
Sara Al beladi  
Linda Van Ryneveld  
Anisha Augustine  
Sara Ba Abdullah  
Imelda Sison  
Sara Diaz  
Guia Doronila  
Walaa Ismail  
Rajani Ravi