

# 2018 Performance Improvement Report STRATEGIC PRIORITY 3

Organizational Sustainability

### **Project Name**

Improve D- Dimer Turn Around Time

☐ Contained or reduced costs

□ Increased customer satisfaction

Click or tap here to enter text.

☑ Improved productivity☑ Improved work process☑ Improved cycle time

☐ Other (please explain)

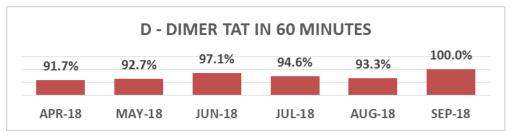
Site Jeddah		Department	
		Pathology/ Hematology Department	
Project Status	Project Start Date	Project End Date	
Completed	03-15-2018	09-30-2018	
Problem: Why the project was needed? D-Dimer test done for inpatient and outpatients throughout 24 hours 7 days a week. The TAT for D-Dimer is 60 minutes Result shows that 91.4% of the test are completed within 60 minutes from January till March 2018; there are many factors that affected the test TAT e.g. (Giving false abnormal results) like Quantity not sufficient, Lipemic Icteric, Hemolyzed specimens repeat. This project started to increase the % of completed test within 60 minutes due to importance of clinical decision depending on lab laboratory results were in some cases the abnormal result will initiate a special protocol for patient's safety.		Aims: What will the project achieve? Improve TAT for D-dimer from 91.7% in 60 minutes to ≈95% in 60 minutes (Acceptable TAT for D- Dimer is >90% in 60 Minutes) by September 2018.	
Benefits/Impact: What is the improvement outcome? (check all that apply)		<b>Quality Domain:</b> Which of the domains of healthcare quality does this project support?	

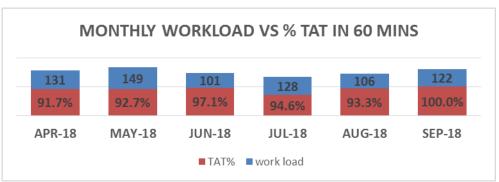
(Select only one)
Timely

## Interventions: Overview of key steps/work completed

- Good handling of time optimized for repeats (for abnormal results) and single out of repeats of false abnormal results which cause loss of
  time and increased TAT for no reason such as quantity not sufficient or clotted specimens. Specimens are checked after the plasma are
  automatically separated and specimens checked for integrity
- True time measure of pre-analytical process of specimen integrity and improve time measure of repeated specimen (change process of specimen handling
- Monitoring time of repeat and eliminating false results of concerned specimen integrity problems through the instant repeat of specimen
  after checking the specimen integrity (machine was programmed to do repeat for abnormal results instead of sample going to filing then
  pulled out for repeat.

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





### **Project Lead**

#### Name

(person accountable for project)

Luay Moh'd

#### **Team Members**

#### **Names**

(persons involved in project)

Dania Arabi (QM Facilitator)
Dr. Abdeghani Maulawi
Richard Hernandez
Sarfinaz Hanbazaza