

AS PART OF THE CHOOSING WISELY MANDATE TO REDUCE UNECESSARY TESTING AND TREATMENTS, ISLAND HEALTH AIMED TO ATTAIN **LEVEL ONE DESIGNATION** BY MEETING CHOOSING WISELY "5 QUICK WINS"

Remove folate testing from your hospital's ordering systems

Folate deficiencies are virtually non-existent in Canada



Eliminate CK testing if troponin is available

Troponin is the biochemical marker of choice for acute myocardial injury



Stop ordering routine chest X-rays in the ICU, except for specific clinical questions

Routine chest x-rays are rarely beneficial and expose patients to harmful radiation

1

Remove "daily lab" options from order sets

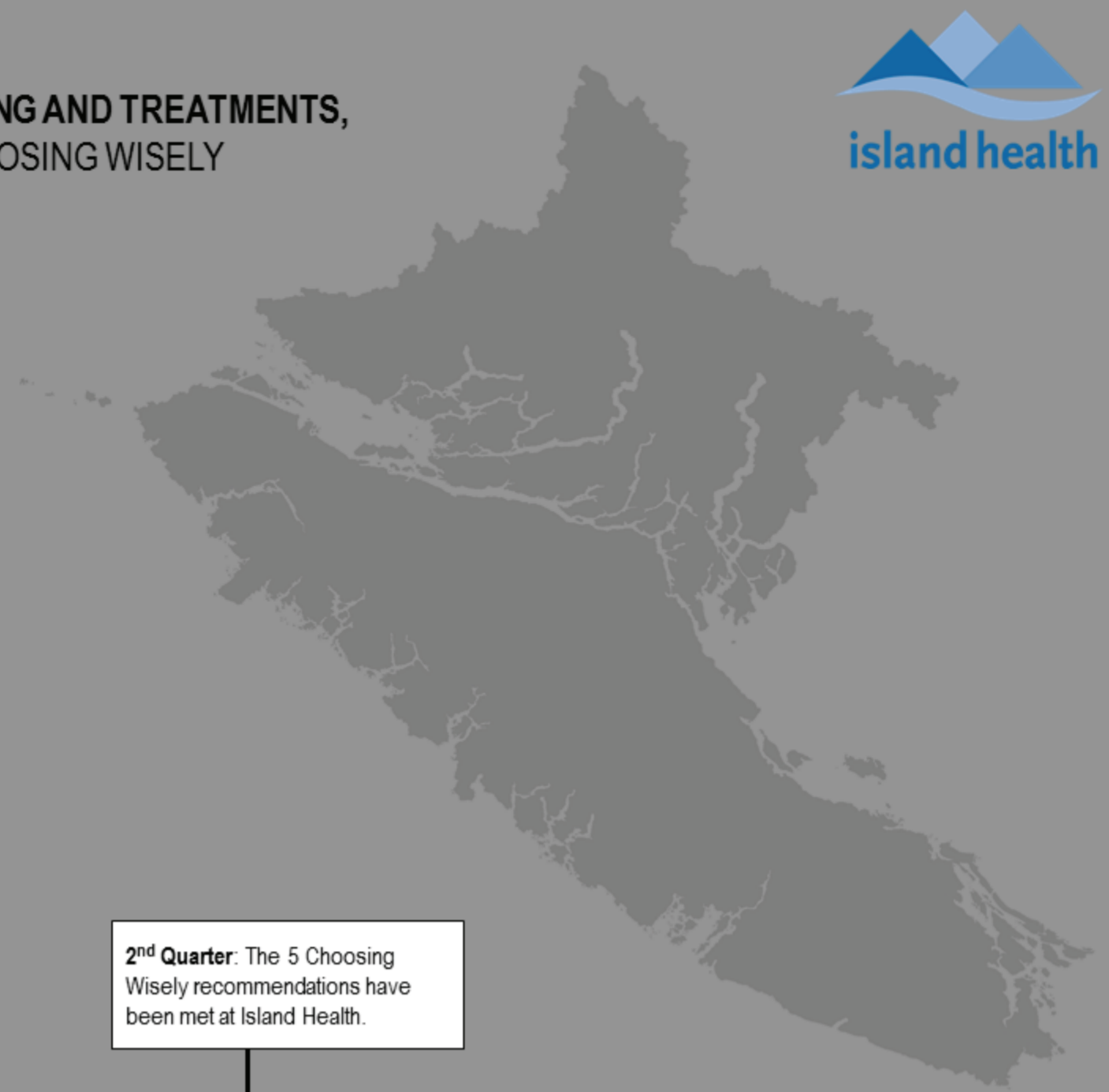
Routine blood draws can cause anemia and may mislead patient care

2

Uncoupling PT/INR and aPTT testing and revise ED order panels

These tests are rarely required together, and bundling them represents a significant cost to the healthcare system

3



Folate testing discontinued at Island Health, no further action was required.

2nd Quarter: PT/INR and aPTT tests were unbundled on requisitions.

2nd Quarter: The 5 Choosing Wisely recommendations have been met at Island Health.

2012

2013

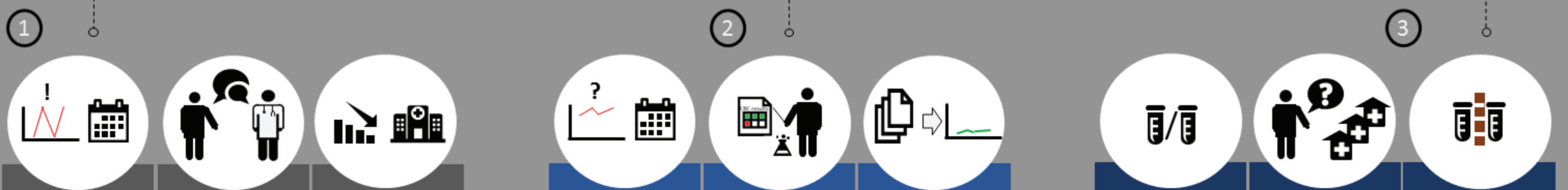
2016

2019

2020

CK-MB testing discontinued at Island Health, no further action was required.

1st Quarter: "Becoming a Choosing Wisely Hospital" campaign is launched.
4th Quarter: An Island Health oversight committee was formed to address the 5 Choosing Wisely "quick wins", 3 of which were not yet met.



Extensive chest x-ray usage was defined as a patient having three or more daily consecutive x-rays in the Intensive Care Unit (ICU). This measure varied by site.

The ICU quality council and ICU physicians assessed the data, current literature and local practice in the use of chest x-rays.

Local changes were significantly associated with a reduction of CXRs in the three largest and highest chest x-ray using ICU sites.



Four or more daily consecutive Complete Blood Count (CBC) draws was felt to reflect 'inappropriate' draws. Order sets were reviewed for all "daily lab" options and some revisions were made to older order sets.

Engagement with a clinical expert group helped define an appropriate clinical measure for 'inappropriate' CBC draws through the use of reference ranges.

By leveraging the diverse data sets in the Enterprise Data Warehouse, it was shown that 'inappropriate' CBC draws were rare.



The rates of bundled tests in the Emergency Departments (ED) across the Island were established. The rates varied by ED despite previous requisition changes and order set revisions.

Champions at EDs with higher than expected rates were engaged by the Island Health Choosing Wisely committee to assess why rates were high and how they could improve.

Change ideas at individual sites were identified and implemented, resulting in a significant reduction of bundled tests.

