

Learning Objectives

- Describe how to identify patients who may be appropriate candidates for transplantation early in their disease progression based on specific EMR parameters.
- Explain how to optimize the workflow of referring patients for transplant and expeditiously schedule them for outpatient evaluation via seamless access to and direct communication with the transplant program.
- Outline how to collaborate most efficiently with hospitalists throughout the health system to provide the most optimal care throughout kidney, liver and heart disease progression.

Purpose

- More than **one in every seven adults** in the United States, or **37 million**, are estimated to have Chronic Kidney Disease (CKD) and as many as **9 in 10** adults with CKD do not know they have CKD.
- 4.5 million** adults have been diagnosed with liver disease and **6.2 million** adults have heart failure in the United States.
- Organ Transplantation is one of the few options for patients who have progressed in their disease processes to organ failure.

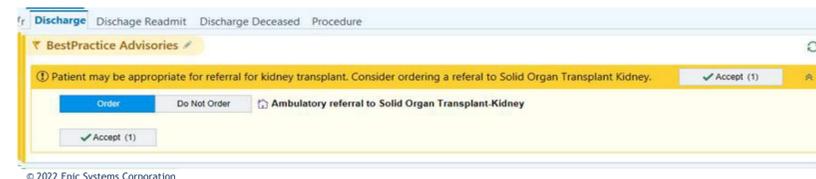
Method

- Employed the Best Practice Advisory (BPA) functionality within the EHR, which utilizes rule logic to identify patients who meet criteria for transplant candidacy and presents a pop-up message to the discharging physician.
- The criteria are organ program specific, including:
 - Estimated Glomerular Filtration Rate (eGFR)
 - Model for End-Stage Liver Disease (MELD) score
 - Ejection Fraction (EV)

...as well as define age, body mass index (BMI), and active malignancy parameters, allowing alignment with selection criteria.

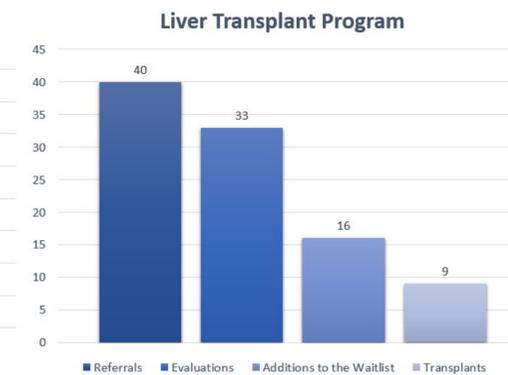
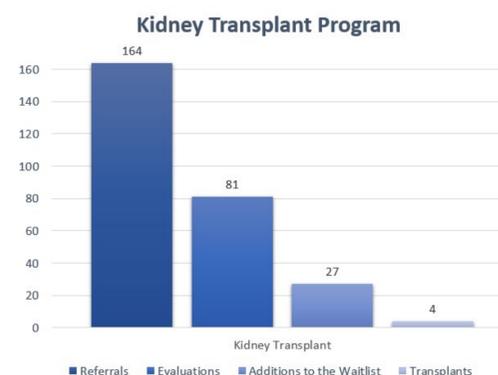
Method Continued

- Once the patient's information in the EHR meets criteria, the BPA appears within the discharge navigator and gives the physician the ability to refer the patient for outpatient transplant evaluation with the simple click of one button.
- This referral routes into a work queue, which is managed by transplant staff.
- The patient receives a phone call within 24 hours to schedule their evaluation.

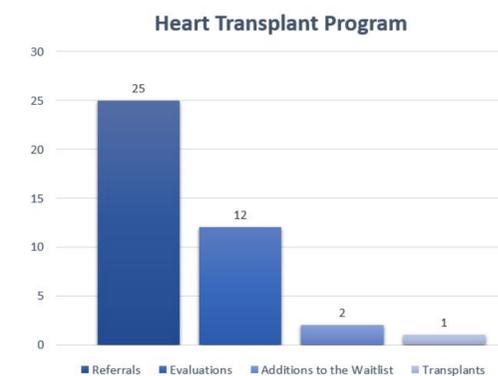


Results

13 month results across the kidney, heart and liver programs:



Results Continued



Volumes represent those patients who were already within the health system, but not being appropriately referred to transplant. Utilizing innovation, available resources and tools within the EHR, patients were identified early in their disease progression and provided the lifesaving and quality-of-life-improving care they needed.

Key Takeaways

- Establish clinical, administrative & IS&T champions to review current practice & identify strategies to utilize technology to best serve patients.
- Partner with providers & staff throughout the health system to identify patients and facilitate expeditious referral to advanced therapies.

Lessons Learned

- Successful implementation hinges upon a collaborative & innovative team effort of clinicians, administration & IS&T personnel.
- Establishing & executing a well-developed outreach strategy is imperative to educating clinicians about the functionality and goals of the initiative.
- Jefferson Health has grown from three to 18 hospitals in less than a decade and through utilization of the EHR, we have been able to improve network retention and retain patients in our system.

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Sources:

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