



“...patient wait times in the outpatient oncology infusion unit indicated a need to streamline phlebotomy processes by using existing resources to decrease laboratory turnaround time.” Gjolaj et al (2014).

Reference:

Gjolaj, L.N., Gari, G.A., Olier-Pino, A.I., Garcia, J.D. and Fernandez, G.L. (2014) Decreasing Laboratory Turnaround Time and Patient Wait Time by Implementing Process Improvement Methodologies in an Outpatient Oncology Infusion Unit. Journal of Oncology Practice. October 21st. .

Improvement methodologies in an outpatient oncology infusion unit [http://ctt.ec/H29a5+](http://ctt.ec/H29a5+@ivteam)
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Abstract:

PURPOSE: Prolonged patient wait times in the outpatient oncology infusion unit indicated a need to streamline phlebotomy processes by using existing resources to decrease laboratory turnaround time and improve patient wait time.

METHODS: Using the DMAIC (define, measure, analyze, improve, control) method, a project to streamline phlebotomy processes within the outpatient oncology infusion unit in an

academic Comprehensive Cancer Center known as the Comprehensive Treatment Unit (CTU) was completed. Laboratory turnaround time for patients who needed same-day lab and CTU services and wait time for all CTU patients was tracked for 9 weeks.

RESULTS: During the pilot, the wait time from arrival to CTU to sitting in treatment area decreased by 17% for all patients treated in the CTU during the pilot. A total of 528 patients were seen at the CTU phlebotomy location, representing 16% of the total patients who received treatment in the CTU, with a mean turnaround time of 24 minutes compared with a baseline turnaround time of 51 minutes.

CONCLUSIONS: Streamlining workflows and placing a phlebotomy station inside of the CTU decreased laboratory turnaround times by 53% for patients requiring same day lab and CTU services. The success of the pilot project prompted the team to make the station a permanent fixture.

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