

# The Laboratorian as a Clinical Consultant

Anthony A. Killeen, MD, PhD  
Professor and Vice-Chair  
Dept. of Laboratory Medicine & Pathology  
University of Minnesota

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# Disclosures

- No financial conflicts related to this talk
- No discussion of commercial products or off-label use of drugs
- Chair of an AACCC Task force on this topic
- AACCC Board Secretary

# Learning objectives



Describe the need for clinical laboratorians to expand their sphere of influence outside the walls of the clinical laboratory

Identify opportunities in their institutions for expanding their professional role

Identify key clinical and administrative partners for a successful program that fully utilizes the skill set of the laboratorian

Discuss the key areas in which laboratorians can partner with care teams to improve patient care

# The Case for Expanding the Consulting Role of Lab Medicine Professionals

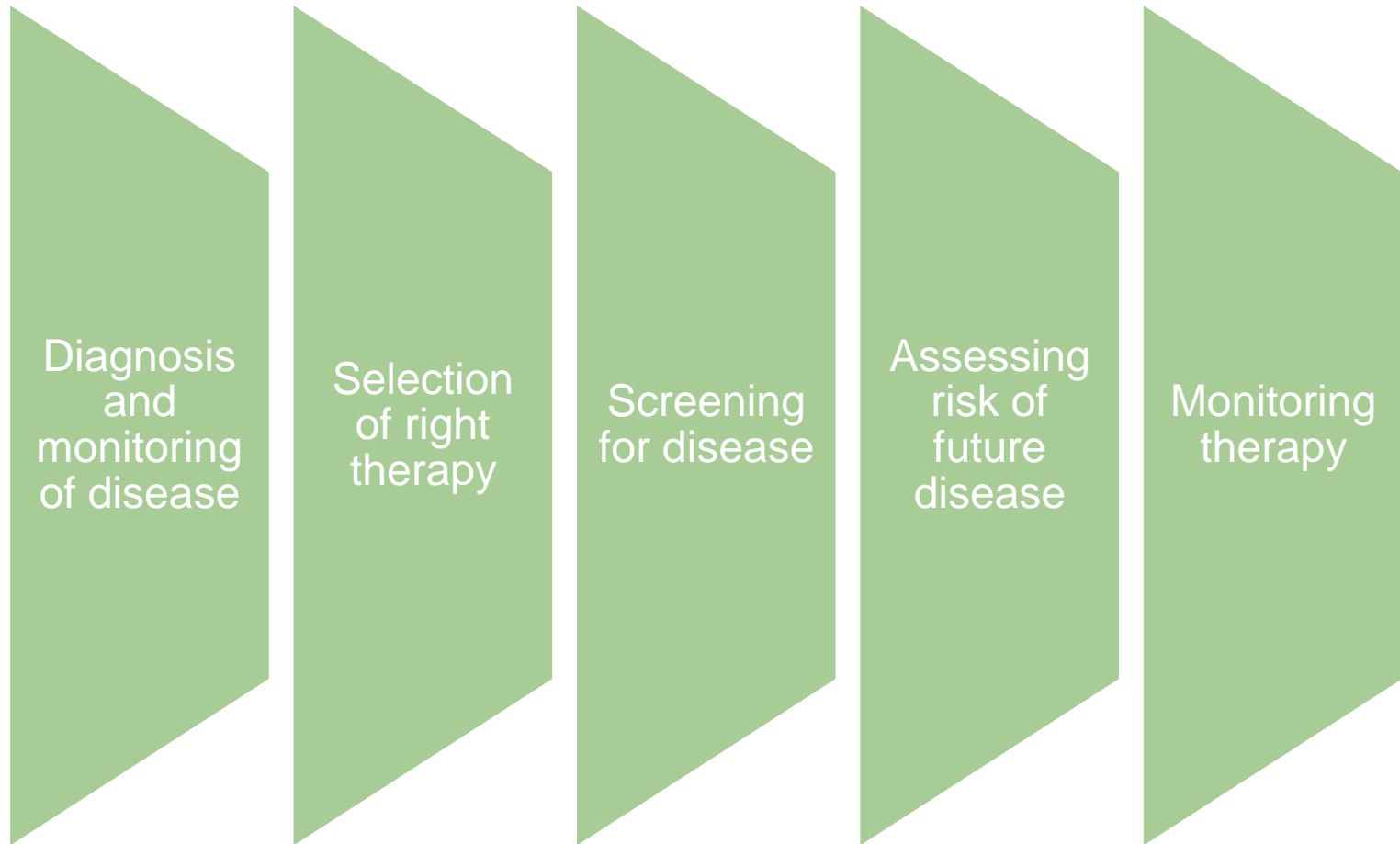


- Laboratory Medicine knowledge base is rapidly expanding
- Lab tests are central to clinical medicine today
- Healthcare is being given by providers who may have little or no formal training in Lab Medicine
- Lab Medicine Professionals are in a strong position to be engaged as members of clinical care teams with expertise in laboratory testing, laboratory management, and result interpretation relevant to patient care

# The Case (continued)

- An active consultation role has benefits for patient care and for hospital cost savings
- As fee-for-service diminishes, all clinical staff will need to demonstrate their value, and consultation provides visibility
- Pharm Ds have changed their practice role to one of more direct engagement in medical decision making, and Laboratory professionals could and should follow a similar path

# The Critical Role of the Clinical Laboratory Today



# Spring 2014 Survey Results (N=49) NACB

- Nearly uniform agreement on the importance of providing consultations
- All indicate they are providing consultations
  - Toxicology and endocrinology most frequent areas
- Most (71%) indicate that their consultations are never documented in the medical record
- Most (96%) are not reimbursed for consults
- Most (71%) indicate clinician unaware of their expertise

# Survey Results (continued)



- Lack of hospital staff credentialing is a barrier to formal consultation
- Improvements desired: reimbursement, skill building programs, enhanced training during fellowship programs
- Most (94%) are involved in educating trainees in Lab Medicine



# Education of Clinical Chemists



- Educating the next generation of professionals is key.
- Prioritize professional programming content to enhance consultative skills of clinical laboratorians
- Provide resources for clinical laboratorians for test utilization control efforts

# Education in Lab Medicine in U.S. Medical Schools



- Generally, very limited
- A national survey of U.S. medical schools reports median only 12.5 hours (range 0-104)
  - (B. Smith et al., Academic Medicine, 2015)
- Laboratory Medicine encompasses a broad discipline and knowledge base that is relevant to clinical medicine

# Advocacy for Recognition in Hospitals



- Credentialing of board-certified clinical laboratorians (e.g., those certified in clinical chemistry) as members of the hospital staff

# Advocacy for Reimbursement



- Many feel that reimbursement for consultations is not essential, and it's absence is not a hard stop to progress
- Financial case is based on savings from better patient care
- However, lobbying for reimbursement would raise awareness of the clinical lab profession

# Engagement with Others on Test Utilization



- “Choosing Wisely” (ABIM)

# The Clinical Chemist as a Consultant Campaign



- Developed by AACCC
- Activities on several fronts to promote this idea
- Government, including the USPHS and military, specifically advocating for a career track similar to pharmacists
- Hospital executives
- Clinicians, nurses, and pharmacists
- Other professional societies, especially those that work with laboratorians on a daily basis

# Potential Obstacles

- Primarily directed to those working in clinical settings
- Time required to develop a robust consultation role
- Reluctance of individuals who are comfortable with their current roles
- Hospitals may be reluctant to credential clinical laboratory professionals or may not desire an expanded role
- Other groups may see this as an encroachment on their activities
- This initiative may be redundant outside the U.S.
- The initiative has uncertain financial costs

# Interviews and Focus Groups (Lab Med Professionals)



- Lab Med professionals need to be reframed as a resource, not a service
- Our value is usually appreciated after 1-on-1 encounter
- Our value in test selection/interpretation needs to be more clearly promoted
- We can reduce costs, improve outcomes, avoid errors
- LMPs at hospitals and academic settings saw greater need for change than did those in reference labs



# Key Themes

Need to understand each other's role  
and abilities

Lab Medicine Professionals have a  
specific role in a health care team

# Interviews and Focus Groups: Barriers To Change

- Lack of proximity to patient setting
- Time
- Financial
  - “An unnecessary pill can cost \$700, but an unnecessary lab test is cheap”
- Clinician awareness
- Self-perception
- Changing the status quo is hard

# Opportunities

- Laboratory medicine is a growing field with increasingly complex tests
- Physicians struggle to understand laboratory testing
  - They have passed responsibility for many pharmacy-related activities to Pharm. Ds., and they value the latter's expertise
- Physician activities increasingly being provided by midlevel providers who have little, if any, formal training in laboratory medicine
- Clinical laboratorians can fill real needs and gaps in clinical practice as it relates to laboratory testing

# Obstacles



**Time (e.g., for  
rounding)**

**Reimbursement**

**Limited labor  
force**

**Comfort level**

**Regulation/  
accreditation?**

# How to Elevate Our Role? Exposure

- Establish relationships
- Increase understanding of the laboratory and what we can offer
- Increase visibility



# How to Elevate Our Role?

## Identify and Highlight our Value

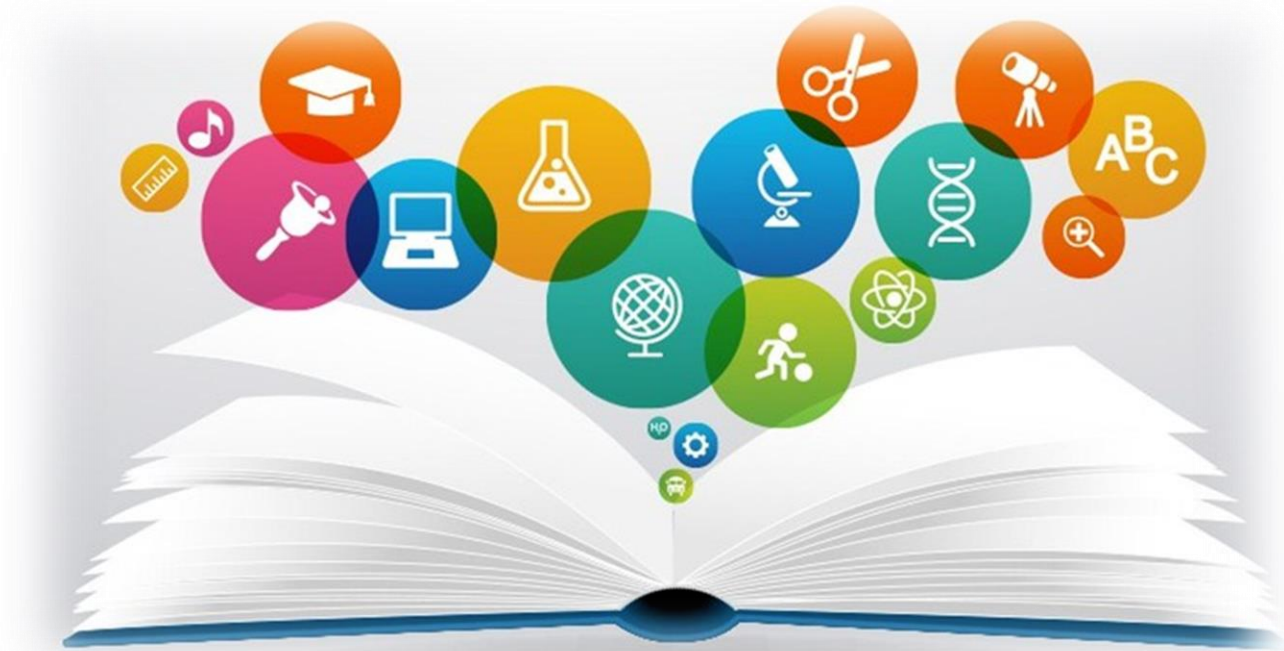
- Identify specialized tests that require our expertise
  - Reference labs report more positive encounters with clinicians
- Reducing errors (wrong test, wrong collection, medication interactions, wrong interpretation) that can harm patients
- Prevent wasteful testing – financial savings
- Encourage appropriate testing at the right time

# Why Now?

- Patients have access to the own records and may need test interpretation
- Patients ordering their own tests
- Providing confidence to clinicians in patient interactions (“what should I tell my pt.?”)
- Rapid growth of testing in areas such as molecular diagnostics, new biomarkers, multi-analyte testing

# Medical Education

- Educate students, residents, physicians, nurses, colleagues





# How Do Providers See Us?

- 150 specialists, 150 GPs

# Physician Key Findings



- View themselves as central to healthcare provision
- Regard themselves as generally familiar with lab testing but 25% consult another expert at least weekly on lab tests
- 62% use online references weekly but only 31% consult other medical experts

# Physician Key Finding (continued)



- Are aware of rising costs and are busy
  - 71% see  $\geq 50$  pts/week; 10% see  $>200$  pts/week
- Most do not consult with laboratorians on a regular basis
  - Perceived lack of expertise in medical field
  - Those who do understand laboratorian's skills are more likely to consult frequently

# What do Physicians Want from Laboratory Testing?

Reliability

Speed/efficiency

Accuracy

Trustworthy

Consistent



# If a Lab Test Expert Were Available, How Often Would You Consult?

- 47% of GPs at least once/month
- 43% of specialists at least once/month
  
- 7% of GPs daily
- 9% of specialists daily

# What's in a Name?



- “Lab Director” most commonly indicates:
  - Specialized in lab testing
  - An Administrator/ Lab Manager
- “Lab Practitioner” most commonly indicates
  - Specialized in lab testing
  - A clinical pathologist
- “Lab Specialist” most commonly indicates
  - Interpreting results
  - Specialized in lab testing

# The Broader Role of Lab Medicine Today



- Current evidence and future perspectives on the effective practice of patient-centered laboratory medicine. Hallworth et al., Clin Chem 2015; 61(4):589-599
  - Survey of the contribution of lab medicine to patient outcomes and gaps in our knowledge

# Patient-Centered Laboratory Medicine



- “Medicine in the 21<sup>st</sup> century needs a flexible information resource that facilitates selection of the right test on the right patients at the right time with results delivered in a timely fashion to the right place accompanied by context-specific interpretation and, where appropriate, linked to guidance on the agreed action to be taken.”
  - Hallworth et al., Clin Chem 2015; 61(4):589-599





# Changing our Role is One Area Identified as Needing Attention

- “Defining new roles for lab professionals that are focused on optimizing patient outcomes by adding value at all points of the diagnostic “brain-to-brain” cycle and auditing the effectiveness of these roles and the overall diagnostic process”
  - Hallworth et al., Clin Chem 2015; 61(4):589-599

# What Works?

- Visibility and expertise
- Morbidity & Mortality Conference
- Morning Report
- Utilization Committee
- Diagnostic Management Teams
- Laboratory Formulary/Send-out Review
- Hospital Quality Committee
- Hospital Rounds, Clinics
- Other

# Any Road?

*Would you tell me, please, which way I ought to go from here?"*

*"That depends a good deal on where you want to get to," said the Cat.*

*"I don't much care where—" said Alice.*

*"Then it doesn't matter which way you go," said the Cat.*

*Lewis Carroll, Alice in Wonderland*

# Summary



Need for expanded/enhanced role of Laboratory Medicine Professionals

Opportunities at all phases of testing process, including education, for engagement

Obstacles are real, but not insurmountable

# Questions?

**Presented by:**

Anthony A. Killeen, MD, PhD  
Professor and Vice-Chair  
Dept. of Laboratory Medicine & Pathology  
University of Minnesota  
Email: kille001@umn.edu

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