

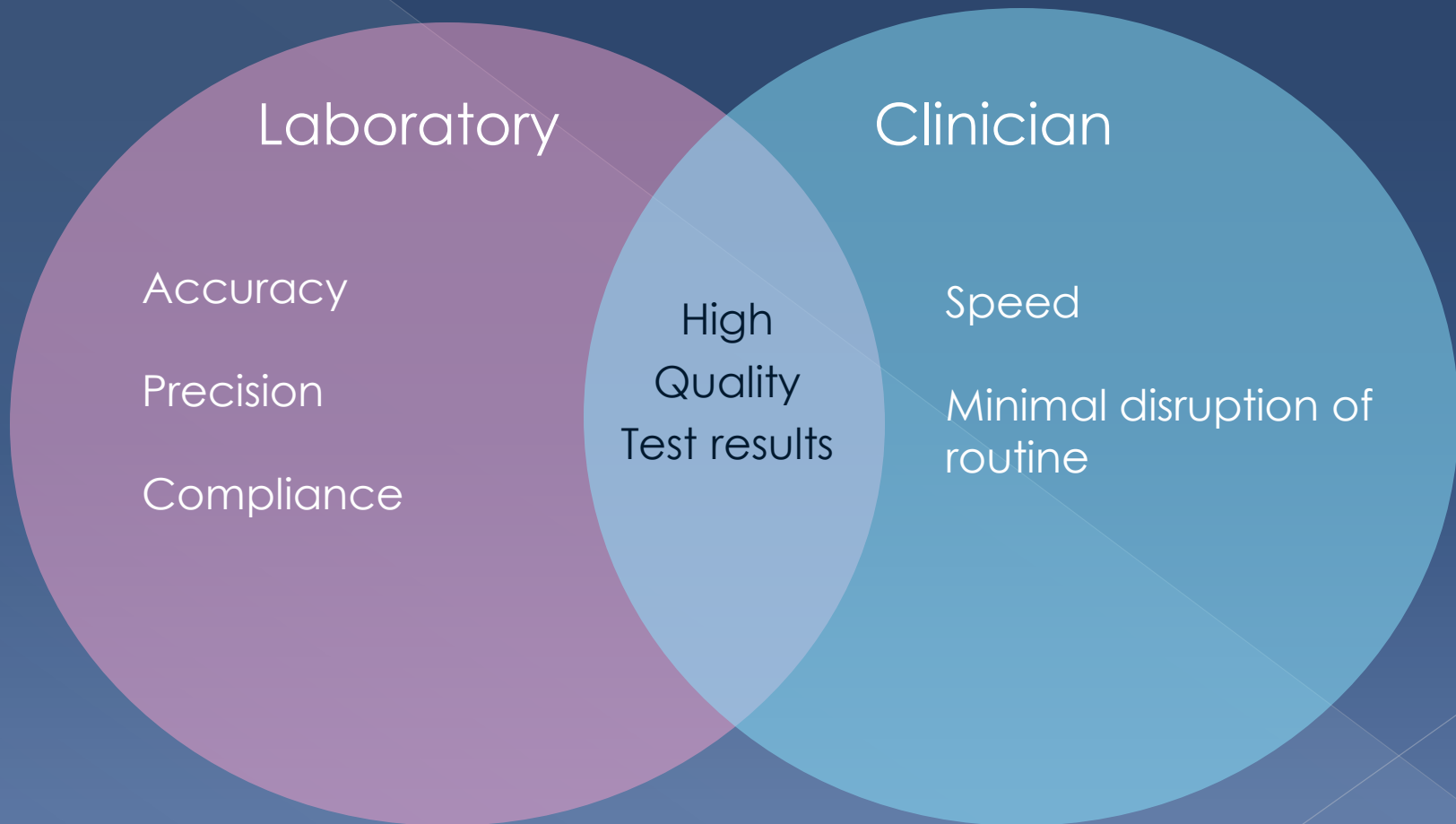
Clinician Versus Laboratorian: Conflict or Collaboration?

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Health Care Goals

- ◎ Laboratory
 - > Optimized patient care
- ◎ Clinician
 - > Optimized patient care

How do we get there?



The Result?



Accuracy / Precision

- Clinician

- > If a number is reported, it is correct

- Laboratory

- > Evaluation performed before putting a test into clinical use
- > Each result evaluated
- > Limitations and interferences evaluated
- > Reevaluated regularly to ensure appropriate performance

Resolution

◎ Collaboration

- > Train caregiver on limitations and potential interferences
- > Discuss need to evaluate results based on patient presentation

Speed

- ◎ Clinician
 - > Implement POC for everything
- ◎ Laboratory
 - > Evaluate TAT, Lab process
 - Would changes answer clinician needs?
 - > Implement POC as needed
 - If result not acted upon immediately, no need for POC
 - Workflow changes may be needed to optimize POC implementation

Resolution

◎ Collaboration

> What?

- Evaluation of request for specific POC test
 - Formal process

> Why?

- Need the result now
- Salesman was convincing
- Require evidence of clinical need

> Who?

> When?

> How?

Resolution

◎ Collaboration

- > What?
 - Lab and clinicians working together
 - ad hoc or standing committee
- > Why?
- > Who?
 - Defined timelines
- > When?
 - Studies, P&P, training, etc.
- > How?

How: the nitty gritty

○ Studies

- > Accuracy / precision
 - Lab or operators?
 - Include ease of use evaluation?

○ P & P

- > Lab to draft
- > Clinician to revise
- > IQCP?
 - Lab template completed by group?

○ Training

- > Key clinical caveats

Minimal Disruption of Routine

- QC, Proficiency testing and competency take time from patient care
- Is there value?
 - > other than compliance
- Why should I, the clinician, bother?

Compliance

- Maintain high quality testing
- Requires clinician time
- Substantiate need through risk analysis

Use Risk Assessment

- Direct correlation of quality test results and improved patient care
- Include clinician in the assessment
 - > How wrong is clinically wrong?
 - > What clinical presentation might indicate an erroneous result
 - > How can risks be mitigated?
- Demonstrate appreciation for clinician expertise

Use Risk Assessment (2)

- ◉ Demonstrate risk reduction through quality practices
 - > QC mitigates risk of erroneous result (hopefully)
- ◉ Step by step evaluation of risk reduction through training and competency assessment
- ◉ There are reasons for interruptions of routine
 - > Alter workflow to minimize disruption

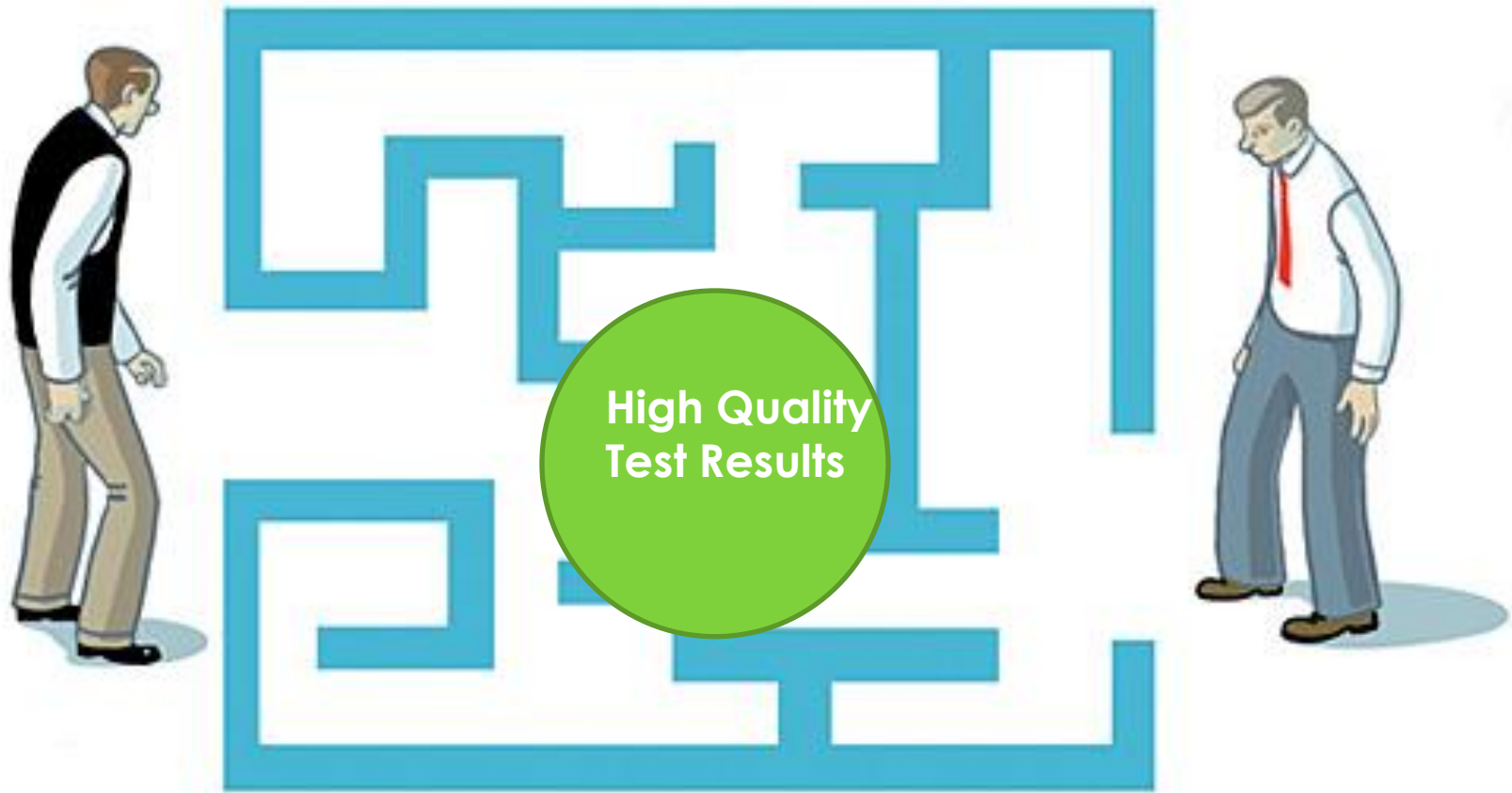
Communication is the Key

- Reduce conflict and stress
 - > Discussion rather than confrontation
- Develop people who want to help
 - > Respect for expertise works both ways
- Encourage consistent operator compliance
 - > Increased accuracy of POCT

Communication=Collaboration

- ◎ Foster more willing compromise
 - > Mutual respect reduces confrontation
- ◎ Stimulate open and direct discussions
 - > Easier to cooperate with someone who listens
- ◎ Produce faster solutions to challenges
 - > Expertise from both approaches

Bringing it all together



Results

High Quality Testing

+

Compliant Program

+

Content Clinicians

Improved Patient Care



Thank You

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