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Improving the Care of Patients with Cirrhosis at MMC

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Improving the care of patients with cirrhosis at MMC

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Purpose

Improve the rate and timeliness of paracenteses for patients with decompensated cirrhosis.

Background

- Decompensated cirrhosis: 5-yr mortality-rate of ~50%.
- Spontaneous bacterial peritonitis (SBP) drives mortality⁺.
- SBP is diagnosed by the analysis of ascitic fluid obtained by diagnostic paracentesis.
- Patients with ascites admitted to the hospital should undergo abdominal paracentesis (AASLD Practice Guideline Class 1, Level B)
- Despite this, paracenteses are only performed on 40-60% of qualifying patients[±].
- MMC baseline chart review: Completion rate of 44%.

Approach and Methods

- Quality improvement (QI) project.
- Focus groups and surveys of Internal Medicine (IM)
 residents, physicians, and APPs, to identify barriers to timely
 paracenteses.
- Our major goals were to address:
 - 1) Knowledge gap regarding SBP.
 - Capacity building related to abdominal ultrasound and paracenteses.
 - 3) Logistical barriers.
- Track rate and timeliness of paracenteses performed on eligible patients over the course of our project.

*Hospital Medicine attendings; †Internal Medicine residents; † Kim et al 2014, Niu et al 2018; †Brooling et al 2014, Orman et al 2014, Rosenblatt et al 2019







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Results

Barriers to paracentesis completion*	QI interventions
Recognition of necessity	 Presentations to Hospital Medicine (HM) attendings and APPs, IM residency, Family Medicine residency IM residency educational conference by Gastroenterology/HM Created patient education handout Designed Clinical Decision Support tools within Electronic Health Record (EHR)
Time constraints; logistical issues	 Creation of pre-prepared diagnostic paracentesis kit Involvement of HM medical assistant
Residents: lack of supervision; Residents and attendings: lack of training	 Concurrent ramp-up of ultrasound elective, teaching, CME by HM Creation of MMC-focused instructional video on performing a safe diagnostic paracentesis
Unclear requirements for privileging	Clarification and communication with HMOngoing discussions with residency

^{*}Compiled based on focus groups and surveys

Next Steps

- Perform chart review assessing completion rates and timeliness of paracenteses over time.
- Continue education interventions.
- Deploy EHR tools including best practice advisory.

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