



Practice Performance, Improvement and Administration

PEER REVIEW IMPROVES APPROPRIATENESS OF CARDIAC PROCEDURES

Poster Contributions

Poster Sessions, Expo North

Saturday, March 09, 2013, 3:45 p.m.-4:30 p.m.

Session Title: Common Cardiac Procedures: Appropriate Use, Outcomes and Education

Abstract Category: 22. Performance Improvement

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Authors: *Manish Patwardhan, Dana Eilen, Gregory Harris, T. Ferguson, Ramesh Daggubati, East Carolina Heart Institute, Greenville, NC, USA*

Background: Recent studies have shown increasing inappropriate use of cardiovascular procedures. At our institution, we established a peer review process to evaluate appropriate use criteria (AUC) of cardiac catheterization. We sought to evaluate the appropriateness of procedures performed before and after the peer review became a reality.

Methods: Using the East Carolina Heart Institute's Cath PCI Registry database, we analyzed the appropriateness of procedures performed in our cardiac catheterization laboratories for 2 quarters prior and for 2 quarters after starting the peer review process. Total number of patients were 1474.

Variable	2011 Q3 n=370	2011 Q4 n=357	2012 Q1 n=378	2012 Q2 n=369
PCI procedure not classifiable for AUC reporting	6.1	5.9	4.1	3.5
Appropriateness in ACS	93.7	94.1	95.5	95.9
Uncertain appropriateness	5.2	5.5	4.1	3.8
Inappropriate PCI in ACS	1.2	0.4	0.4	0.3
Appropriate PCI in non-ACS	27.5	20.6	47.7	45
Uncertain appropriate PCI in non-ACS	52.2	58.8	41.5	40
Inappropriate PCI in non-ACS	20.3	20.6	10.8	15

Results: Appropriateness of procedures both for acute coronary syndrome and non-acute coronary syndrome patients improved with peer review process.

Conclusions: Internal peer review process at East Carolina Heart Institute has improved the adherence to appropriateness use criteria in the cardiac catheterization laboratory and reduced inappropriate device use.