Limiting utilization of laboratory tests that have little to no impact on patient care is a common goal of the medical center. The neurosurgery service, due to the high volume of patients and frequent usage of ICU setting has high lab usage, however, only few labs seem to truly change course of care. The goal was to reduce the number of chloride, magnesium, phosphorus and calcium (total & ionized) tests ordered by 50% compared to FY 2011 (adjusted for # of patient days).

Data through April
- Total of 21,972 tests YTD have been ordered compared to a total of 45,023 tests during FY 2011
- Adjusted for 100 patient days, 172 tests per 100 patient days YTD have been ordered compared to 253 tests per 100 patient days in FY 2011.
- Direct lab cost of $62,031 YTD compared to $137,809 in FY 2011
- Billable lab charges of approximately $1,800,000 YTD compared to approximately $3,600,000 in FY 2011

The Problem

Project Goal

The goal was to reduce the number of chloride, magnesium, phosphorus and calcium (total & ionized) tests ordered by 50% compared to FY 2011 (adjusted for # of patient days).

Results / Progress to Date

- Formulate formalized guidelines for when order chemistries with the head of comanagement hospitalist service
- Education/Dissemination of info to residents and NPs on service
- Encourage ICU nurses not to order labs on behalf of residents on call

Lessons Learned / Moving Forward

- Labs ordered from multiple providers
- NPs, RNs
- Continued education of incoming residents
- Continued integration of comanagement hospitalist service in decision making regarding lab utilization
- Avoiding usage of lab panels