

SCCM Choosing Wisely KEG meeting January 20, 2021

Choosing wisely KEG Annual Meeting

Speakers:

Anita Reddy, MD

Matthew Tyler, MD

Slides are available on SCCM Connect - Choosing Wisely KEG website

1. KEG Goals – Dr Reddy discussed the Choosing Wisely KEG goals:
 - a. A forum to improve awareness of the Choosing Wisely campaign, exchange ideas regarding stewardship efforts, discuss implementation methods and successful methods to overcome barriers and challenges to implementation.
 - b. The vision is to promote patient-centered care and to reduce or eliminate unnecessary interventions that can cause patient discomfort, increased length of stay, morbidity and inefficiency in resource utilization.
2. Steering Committee – the Steering Committee members were introduced to the group. Special thanks to Dr Zimmerman who has been our advisor since we started back in 2019.
3. Prior Meeting Topics and Social Media Posts
 - a. An overview of the past meeting topic discussions since initiation of the Choosing Wisely KEG was discussed. This KEG has been very productive, and presentations have covered a wide range of topics
 - b. We have released a number of social media posts promoting Choosing Wisely over the past year. The group was encouraged to use the hashtag #choosingwiselyICU when posting on Choosing Wisely topics
4. Future directions
 - a. Assist Quality and Safety Committee with communicating/advertising/studying Choosing Wisely Next Five
 - b. Education about Choosing Wisely
 - c. Sharing ideas on implementation of Choosing Wisely Initiatives
5. Choosing Wisely Next 5
 - a. “Choosing Wisely for Critical Care: The Next Five” will be released in CCM on-line on January 29, 2021
 - b. Any help this KEG can offer to communicate these and help reinforce would be appreciated
 - c. Dr Zimmerman encouraged all to tune in to the Choosing Wisely sessions during Congress. He also recommended the KEG write an article on the next 5 for *Critical Connections* and asked the group to consider research on existing knowledge of Choosing Wisely and if these recommendations are being implemented at organizations.
6. Choosing Wisely session at 2021 Congress
 - a. Prerecorded session (can listen anytime)
 - b. *Choosing Wisely in Critical Care: How to Succeed in Implementing Less Is More*
 - i. **Topics:**
 - Choosing Wisely: The Next Five Recommendations**
Pamela L. Smithburger
 - What You Can Do Tomorrow to Reduce Imaging in the ICU**
Jeffrey Kanne
 - What You Can Do Tomorrow to Reduce Medication Use in the ICU**

Mitchell S. Buckley

What You Can Do Tomorrow to Reduce Laboratory Testing in the ICU

Anita Reddy

What You Can Do Tomorrow to Improve Mobility in the ICU

Sapna R. Kudchadkar

What You Can Do Tomorrow to Improve Patient Experience in the ICU

Julie Rogan

7. Discussion: “Inflammatory Markers in COVID-19: Useful or Wasteful?” – Dr Tyler presented the experience with COVID inflammatory markers at his hospital system
 - a. Initial studies suggest following certain laboratory markers may guide prognostication of COVID-19 patients
 - b. Institutions have used laboratory cut-offs to determine if a patient is a candidate for certain therapies (Ferritin, CRP, LDH, D-dimer, CPK, Procalcitonin)
 - c. During the first surge, order sets were developed for COVID-19 patients that included prechecked orders for several serial labs that are not typically ordered. Some institutions are using these labs to determine eligibility for select medications. Are these useful or wasteful?
 - d. Ie, CPK, troponin, ferritin, LDH, CRP, d-dimer; Procalcitonin; Hepatitis panel; Quantiferon TB plus, Interleukin 6
 - e. Does the benefit of these labs outweigh the cost?
 - f. Tallying the general cost for each of these leads to almost \$1000 in extra expense; Taking out PCT is around \$700 per order cycle (ordered q48h)
 - g. Considering additional tests (CXR, ABG [in awake pt], CT scan) total is almost \$3000
8. This expense is compounded by high cost of COVID-19 medications
 - a. Dexamethasone – the cheapest med is the one with most robust data to support its use
9. How useful are q48h labs? Depending on the organization, the majority of these lab results do not drive changes to treatment.
10. Further discussion revolved around attendees’ experience with these labs at their respective organizations. Implementing measures such as ‘hard stops’ may be effective in reducing unnecessary ordering of select tests. Also key is highlighting the untoward effects of unnecessary tests such as additional needle sticks for the patient, exposing additional hospital staff to covid, as well as the additional PPE required for every additional staff member that must attend to a covid patient.

Jan 20 meeting attendees:

Jessica Mercer

Anita Reddy

Anne Rain Brown

Jerry Zimmerman

Gretchen Sacha

Peter Lindbloom

Deepali Dixit

Bob Gibson

Matt Tyler

Simon Mucha

Jennifer Cortes

Ally Hines