

2023 Choosing Wisely® Champions

The *Choosing Wisely* Champions program

- **Recognizes** individual clinicians for their contributions to the campaign;
- **Inspires** other clinicians seeking to implement *Choosing Wisely*® in their own practice;
- **Provides** society partners an opportunity to celebrate members' contributions to the campaign;
- **Demonstrates** how the campaign is driving change in health care; and
- **Helps** clinicians learn from one another by highlighting exemplars.

Grace Mahowald, MD, PhD

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Dr. Grace Mahowald, Medical Director of the Massachusetts General Hospital Core Laboratory has focused her efforts in addressing utilization challenges in a range of disciplines including toxicology, chemistry, and immunology. Her latest work was initiated during the COVID-19 pandemic, a time of unprecedented staffing and fiscal challenges. Dr. Mahowald identified two common clinical lab workflows, laboratory add on requests and CBC/differentials, as areas requiring a high investment of time from the laboratory with often minimal clinical benefit. Dr. Mahowald, having trained in internal medicine as well as pathology, was familiar with the overuse of these tests and sought to bridge the gap in understanding.

To address these challenges, Dr. Mahowald created and implemented EHR clinical decision support tools to alert providers to situations where the requested add-on order or CBC with differential order may not be appropriate. These alerts were designed and implemented after extensive discussions with clinical teams from internal medicine, oncology, and emergency medicine.

The add on alert for adult inpatients was implemented in March 2022, resulting in a 62% decrease in inpatient add on orders in 2022 compared to the same period in the previous year. Decreases occurred immediately after alert implementation and have been sustained over time. The CBC and differential alert significantly decreased the overall volume of orders for CBC/differential by thousands of tests per month, and importantly decreased the number of labor-intensive manual differentials performed by the lab. This resulted in a highly impactful improvement in turnaround time of over 20 minutes for all manual differentials, with no negative impacts to patient care.

Dr. Mahowald's innovative and collaborative problem-solving approaches have successfully improved the long-term efficiency and quality of the laboratory and have permitted laboratory staff to be deployed optimally to sustain high quality care.

ARUP Healthcare Advisory Services

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ARUP's Healthcare Advisory Services team collaborates with health systems throughout the United States to better implement *Choosing Wisely* guidelines that optimize both reference and in-house laboratory test utilization. The team continues to develop and deploy data analytics tools that are meaningful for clients such as the new AnalyticsDxTM Comprehensive Dashboard and Utilization Analysis reports.

The team has helped clients identify key opportunities to eliminate gaps in their test use that do not adhere to *Choosing Wisely* guidelines, as well as opportunities to reduce inappropriate tests, thereby reducing costs and improving patient safety. AnalyticsDxTM Comprehensive Dashboard and Utilization Analysis reports use pre-built topics to help guide clinical decision support, including troponin retest intervals, clinical utility of CK-MB and procalcitonin testing, misutilization of *Clostridium difficile*, among other topics. Currently, the team has deployed more than a dozen AnalyticsDxTM Comprehensive Dashboards in healthcare systems across the country and is scaling the tool to meet growing customer demand.

Further, the team members are actively involved in supporting organizations such as AACC, PLUGS, ASCP, CLSI, and ASCLS, and actively promote *Choosing Wisely* recommendations.

The team is actively involved with Patient-centered Laboratory Utilization Guidance Services (PLUGS) and has presented multiple stewardship-focused presentations at the PLUGS Summit. In 2022, the team presented "The Importance of Good Governance in Lab Stewardship- Setting your program up for success" and in 2023 presented on "How to Lead with Data-Driven Laboratory Stewardship."



Hackensack Meridian Health Laboratory Stewardship Committee

Team Lead:

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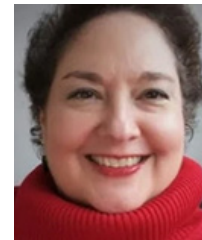


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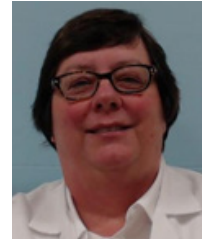
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In 2021, Hackensack Meridian Health (HMH) – a health system with 18 hospitals, partnered with Quest Diagnostics for clinical laboratory management. To reduce costs, standardize care, and optimize test ordering, HMH and Quest formed a lab stewardship program. The program has three key elements: engaged stakeholders from HMH, ongoing advisory services from Quest, and use of Quest Lab Stewardship Enterprise (QLS), an electronic business intelligence and reporting platform developed by health technology leader hc1.

Hackensack Meridian Health's Lab Stewardship Committee (LSC) includes network executive leadership, clinicians, nursing leaders, laboratorians, clinical informaticists, and IT specialists. The LSC analyzed test utilization data from QLS and based on the findings and clinical feedback, initiated dozens of projects to improve appropriate lab utilization.

The *Choosing Wisely* recommendations have been a valuable guide for HMH LSC projects.

- Inspired by *Choosing Wisely* recommendation #30, the LSC added a question to the broad respiratory pathogen panel (RPP) order to help ensure that RPP is ordered for certain defined indications. RPP orders subsequently decreased by approximately 70%, from an average of 4,700 tests per month to ~1,470 tests per month.
- Consistent with recommendation #10, the LSC added TSH with reflex to Free T4 to facility order lists and provided system-wide restraining. This intervention has to-date prevented approximately 26,500 unnecessary Free T4 from being ordered. The average rate of Free T4 per 1,000 patients decreased from 25.0 to 22.1.
- Based on recommendation #13, the LSC removed amylase from GI order sets for acute pancreatitis, consequently decreasing concurrent ordering of amylase with lipase by ~40%.

With these successes, the LSC hopes to continue promoting stewardship of laboratory resources through initiatives such as utilizing electronic clinical decision support to reduce unnecessary duplicative testing, reducing use of limited utility tests, and adopting evidence-based testing algorithms.



Parkview Health System Laboratory Stewardship Committee

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Parkview Health serves northeast Indiana and northwest Ohio and is committed to evidence-based care. For this reason, Parkview has been at the forefront of implementing *Choosing Wisely* laboratory initiatives via a multi-disciplinary laboratory utilization committee. As Director of Corporate Lab Services, Lisa Daniel and Dr. Craig McBride led the committee in starting initiatives based on *Choosing Wisely* recommendations addressing CBC/BMP, CK-MB, amylase, and RBC Folate testing.

Don't order diagnostic tests at regular intervals (such as every day).

Before September 2020, inpatient electronic order sets didn't limit the number of sequential daily BMPs or CBCs. In response, the committee modified all order sets by adding endpoints for daily tests (72-hours initially and then 48-hour limits). Inpatient volumes for BMPs and CBC were reduced 65% over the following year.



Don't test for amylase in cases of suspected acute pancreatitis & Don't test for CK-MB in the diagnosis of acute myocardial infarction.

Before early 2020, amylase and/or CK-MB testing were present on various inpatient order sets. Based on *Choosing Wisely* recommendations, the committee removed amylase and/or CK-MB from all inpatient order sets. Combined Amylase and CK-MB inpatient volumes decreased 82% over the following year.

Do not order RBC folate levels at all.

In 2023 the committee unbundled RBC folate, serum folate, and B12 testing and eliminated inpatient RBC folate testing. Approximately 5880 RBC folate tests have been eliminated per year.

The committee is now pursuing additional initiatives focusing on unnecessary thyroid testing, serum folate and B12 testing, vitamin D testing, test intervals, and best practice laboratory testing for coagulation disorders and catheter-associated urinary tract infections.

All four champions were selected to present their work as part of the ASCP 2023 Annual Meeting Path to Long Beach (virtual) on October 10.