

FIFTY SHADES OF GREY

LEARNING TO LOVE THE PROBE !

Evaluation of a New Portable Ultrasound Facility at Countess Mountbatten House Hospice [CMH]

by Dr Anna Hume

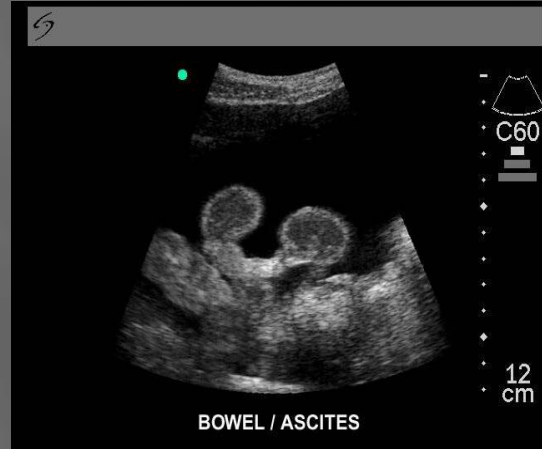
Background

It has been standard practice for all patients to have US prior to paracentesis.

This involved:

- Ambulance transfer to/from Acute Hospital in Southampton [SGH]
- Nurse escort
- Admin time
- Cost average = £600 per patient
- Increased Length of stay by 4-7 days, awaiting scan at SGH
- Poor patient experience

50% of our patients died within 10 days of paracentesis, indicating their general frailty and the importance of short admission.



Ultrasound scan of Abdomen with ascites

Results

50 scans were performed over 1 year:

2 at home - both no ascites [died at home within 7 days]

17 in OPA : 8 admitted for paracentesis

9 no ascites [1 GB abscess , 1 U.retention]

31 IPU scans :17 drains placed

6 no ascites

5 catheters inserted

Outcomes

- 11 admissions avoided
- 31 transfers avoided [31x £600] = £18600
- 124 bed days saved [31x4 minimum wait for scan at £294 per day] = £ 36456

Patient experience improved:

- Unnecessary admission avoided
- Transfer avoided
- Faster relief of symptoms
- Reduced length of stay

Reflections on QI Fellowship

WE LOVE THE PROBE !



Intervention

- A portable US machine was purchased by CMH hospice at £5780
- Suitable training was undertaken by AH at £450