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INCREASING TRICHOMONAS TESTING IN THE PEDIATRIC EMERGENCY DEPARTMENT

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Background Trichomonas is a common adolescent sexually transmitted infection (STI), causing vaginal pain, discharge and dysuria. Affected individuals are more likely to have co-occurrence of other STIs as well, including HIV. Improving the Trichomonas testing process in the ED may result in a higher, targeted testing rate and thus improved detection and treatment.

Trichomonas Testing in the ED

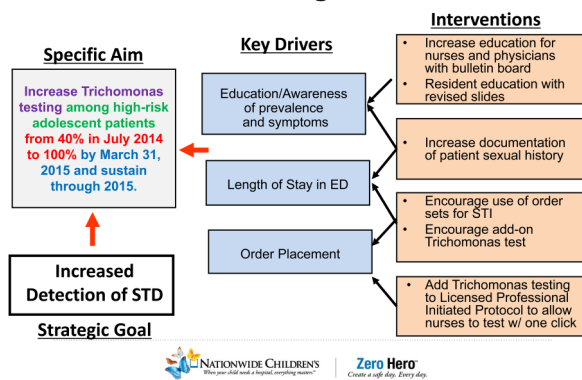


Figure 1 Trichomonas testing in the ED.

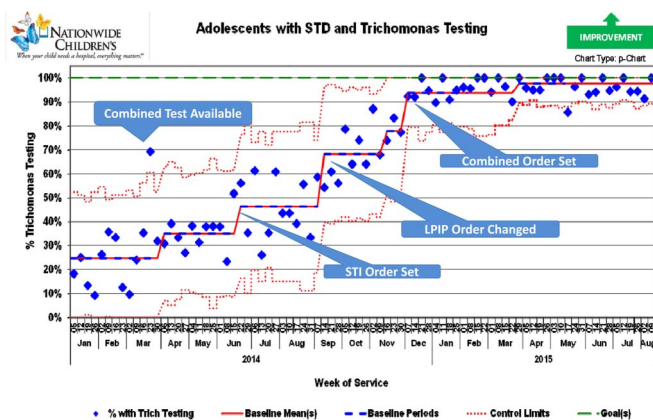


Figure 2 Adolescents with STD and Trichomonas testing.

Objectives To increase Trichomonas testing in the ED among high-risk adolescent patients from 40% in July 2014 to 100% by March 31, 2015 and sustain through 2015.

Methods A team of MDs, CRNPs, RNs and QI professionals assembled in 2014 to address this need. Six months data was collected to define the baseline rate of testing. Deploying the IHI Model for Improvement, the team formulated an aim statement and identified key drivers. Using root cause analysis, interventions were proposed for each problem area. A series of PDSA cycles were undertaken, and the results of each were monitored using a control chart. These interventions included increasing awareness and education for clinical staff; combined test availability; use of order sets for STI; and adding Licensed Professional Initiated Protocol to nurse ordering practice. This was all done in conjunction with feedback for individual missed cases.

Results Over an 18 month period, the rate of Trichomonas testing in the ED rose with each intervention: from 25% (January 2014) to 98% (March 2015) which has been sustained through August of 2015.

Conclusions Improving the process of Trichomonas testing of symptomatic adolescents in the ED, results in higher screening rates among ED pediatric providers.