

CASE STUDY

University of Pittsburgh Medical Center

The University of Pittsburgh Medical Center has long been influential in the field of transplantation. In 1981, transplant pioneer Thomas Starzl, MD, PhD, performed the first liver transplant in Pittsburgh. Since that time, more than 17,000 transplants have been performed at UPMC Presbyterian and Children's Hospital of Pittsburgh.

University of Pittsburgh Medical Center (UPMC), an internationally renowned center, continues to break new ground by redefining patient care and developing new transplant procedures and anti-rejection therapies. In early 2008, UPMC/Thomas E. Starzl Transplantation Institute administrators Bill Morris, Executive Director, Transplant Services, and Nickie Cappella, Business Manager, Transplant Services, began to evaluate the patient transplantation process to determine if substantial time savings could be found between the initial patient referral and the first clinical visit.

"We do not see the patient until we have gathered all medical records, particularly for our kidney services," explains Cappella. What she and Morris discovered was a bottleneck in medical records procurement. Most patients were waiting 100-115 days for their first clinical evaluation.

Morris adds, "Each year our facility manages over 900 renal transplant patients, many with co-morbidities and multiple healthcare providers. So trying to orchestrate the full patient picture by gathering all medical records is nearly an impossible task." In addition, these patients typically have been followed for their disease for years before the transplant referral, and so there is a cumulative impact on the volume of patient data. Historically, UPMC has relied on patients to gather their medical history accurately and expeditiously.

Patient care, not paperwork

For UPMC, it was almost a double-edged sword gathering patient medical records. On one hand, data collection is simplified if the patient can receive their clinical work-up for evaluation at UPMC. On the other hand, the center does not currently provide outpatient dialysis services. "So to get the patient here for three days without dialysis was impractical," says Morris. "Even though we will have an outpatient dialysis center in approximately five years, we needed an immediate solution."

So when Cappella learned about a medical records service that replaces ad hoc data collection with a systematic method that is both reliable and swift, she and Morris decided to give it a try. The initial trial for evaluating eHealth Connect® Record Retrieval Service from eHealth Technologies involved one coordinator with 10 patients.

Immediately, Morris and Cappella saw an impact. "For each patient, our coordinator received complete medical records within one week and in some cases, as quickly as 24 hours," adds Cappella.

"My first response was, where do I sign up?" says Angela Barker, transplant coordinator. "Not only did I save time between the referral and first clinical evaluation, but it was an easy process that allowed me to focus on patient care, not paperwork."

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According to Morris, there are three immediate benefits to using eHealth Connect. First, patients receive a higher level of care. "With each coordinator carrying a caseload between 200 and 300, patients are at risk if the coordinator's focus is consumed by medical records." Second, he and Cappella have seen a higher level of job satisfaction among the coordinators. Third, and perhaps most important to the transplant program, UPMC has a robust candidate list each time an organ is offered. "We do not want to turn down an organ, yet the patient work up must be finished to list them as a candidate."

Cappella examined the average time it took UPMC to list the patient after referral, and she discovered that after the eHealth Connect implementation, patients were listed between 35 to 45 days sooner than in the previous year. In fact, data shows that UPMC went from an average of 104 days to listing in January 2008 to 34 days in August 2008 (Figure 1).

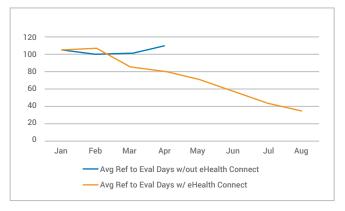


Figure 1

Patients were listed in 35 to 45 days sooner with eHealth Connect Record Retrieval Service

When comparing the number of candidates that UPMC listed between 2007 and 2008, Cappella discovered that the center has often listed more patients each month after the implementation of eHealth Connect. She believes this is a testament to the efficiency of the new process.

"The coordinators also have more time to focus on the clinical aspect of their job, since it only takes five minutes to fill out the eHealth Connect Record Retrieval online form," Cappella says. The coordinators no longer need to keep track of patient information, log attempts to retrieve patient data, or manage potentially large volumes of paperwork.

Electronic records improve compliance

"Another key benefit is the receipt of records electronically," Morris explains. UPMC is moving toward an electronic medical record (EHR) and paperless environment within the hospital. Receiving outside medical records as a PDF removes two additional steps; scanning the paper or fax and sending the files to the transplant database.

"Electronic documents also help with HIPAA compliance," adds Cappella. "Faxes may not be clear, and any paper document (via fax or mail) can get lost."

Overall, the impact of eHealth Connect at UPMC has been a positive one. As Morris states, it comes down to core competencies. "Who's best at gathering medical records? Based on our experience, I would say that is eHealth Technologies."

