Reducing Referral to Selection Committee Throughput for Kidney Transplant Candidates

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Project Goal: Identify bottleneck effects in the process from referral for kidney transplant to presentation of patient at selection committee. Provide recommendations to reduce bottleneck effects in throughput process.

Introduction & Background

• Kidney transplantation is a cost-effective therapy for patients with End Stage Renal Disease.
• Potential kidney transplant recipients must be carefully evaluated to ensure medical, surgical, and psychosocial success post-transplant.
• Not only does this evaluation process identify absolute contraindications to transplantation, it also allows the transplant team to assess and correct medical and psychosocial conditions that may affect transplant outcomes.
• A thorough evaluation requires a multidisciplinary team and an extensive workup over the course of several office visits, all of which must be completed before a candidate is presented before a Selection Committee for consideration for transplant eligibility.
• The scope of this evaluation often results in lengthy wait times before a candidate is even listed with the United Network for Organ Sharing (UNOS).
• The objective of this study is to identify bottleneck effects in the process from referral for transplant evaluation to selection committee.

Kidney Transplant Evaluation Throughput Flowchart

Methods

Process Analysis
Medical student investigators met with attending physicians and transplant coordinators to discuss patient evaluation systems in 2017 and 2018

Process Implementation
In 2018, transplant clinic changed their patient education from an in-person class to over the phone in an attempt to eliminate bottleneck effect of the education class. In addition, patients were scheduled to receive education by phone in an attempt to decrease travel time.

Data Collection
Medical student investigators compiled data from 2017 and 2018 to analyze the effects of the changes to eliminate the bottlenecks in the system.

Results

Referral-to-Selection Checkpoints

Data Analysis

• The changes to the evaluation process eliminated potential bottleneck in patient education
• Patients have to travel long distances to complete kidney transplant evaluation.
• In 2017, patients traveled on average 80.02 miles to the transplant clinic.
• In 2018, patients traveled on average 101.04 miles to the transplant clinic.

Lessons Learned and Moving Forward

• Identify other barriers patients endure when completing pre-selection evaluation including Diabetes, Insurance, Coverage, Age, Cardiologist Clearance
• Emphasize completing all pre-selection evaluation in as little Tulane Medical Center visits, with one visit the gold standard
• There are communication problems across departments for what resources are needed during a patient’s evaluation for kidney transplant, specifically the ultrasound team.
• Medical student investigators will work with the multidisciplinary team to minimize the time a patient is in the evaluation, with a goal of three weeks.

References