

Objective

- Track, schedule and perform renal sonography following ureteroscopy cases to comply with the American Urological Association (AUA) Clinical guideline
- Target goal – 80% compliance in the first six months

Background

- No formal quality process in place
- Why Track?
 - AUA Evidence-Based Guideline
 - Lack of quality per payer designation
- Barriers
 - Incredibly low likelihood for patient developing hydronephrosis
 - Increased cost burden and resource intensive
 - Increased burden to patients with social determinants of health

Actions Taken

- Partnered with Bryan Health Connect
- Received TCPi mini grant
- Beginning Stages
 - Collected base line data – 16% compliance in 2018
 - Hired an additional ultrasound tech to track patients and perform ultrasounds

Sonography Following Ureteroscopy Cases

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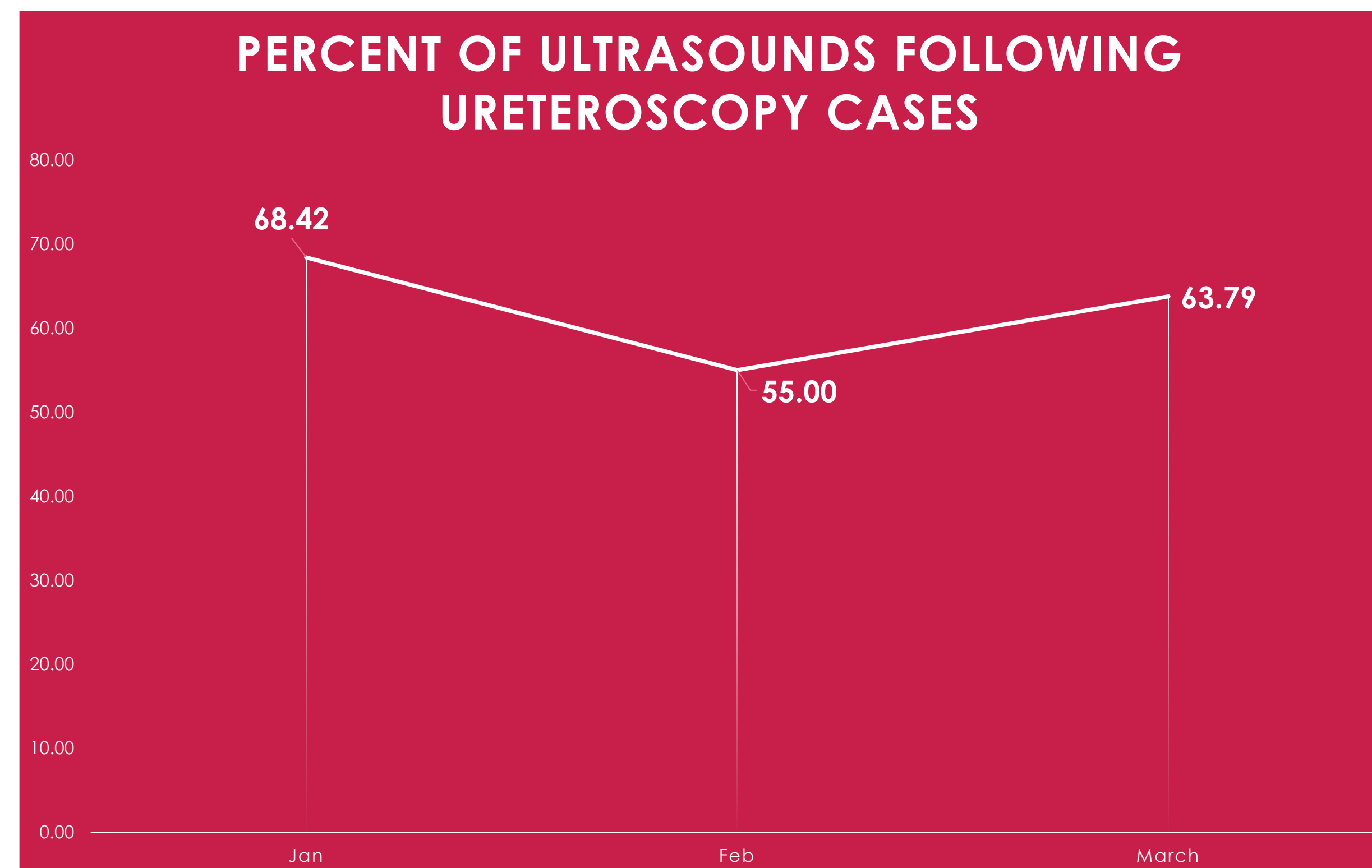
Metrics

- Denominator – all ureteroscopy patients
 - Ureteroscopy patients are tracked by the CPT code entered into the EMR
- Numerator – patients receiving renal ultrasound 6-8 weeks following ureteroscopy

Analysis

- Data collection continues as the physicians work toward meeting their goal of 80% compliance
- No hydronephrosis noted in patients that underwent sonography

Graphs, Pictures, Supporting Documents



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Next Steps

- Future Plans
 - Meet and maintain compliance goal
 - Identify another AUA evidenced-based clinical guideline the physicians are not in compliance with and apply the same PDSA quality improvement study