

IMPLEMENTATION OF A PROLONGED NEONATAL JAUNDICE PATHWAY: A QUALITY IMPROVEMENT INITIATIVE

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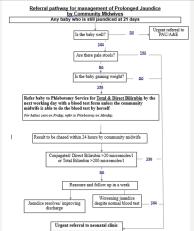
Introduction:

Prolonged neonatal jaundice (PNJ) is mostly benign and self-limiting; however, it could represent a serious pathology such as biliary atresia- timely identification of which is vital. NICE guidance is available on PNJ, however hospital-referrals of all such infants can lead to over-investigation, unnecessary pressure on hospital-resources and undue parental anxiety. Hence, there needs to be a fine balance between over-investigating well infants and timely detection of serious pathology.

Background

- Previously, all cases of community diagnosed PNJ referred to Neonatal Consultant clinic
- Audit in 2013(Jan-Dec) revealed:
- 222 referrals- 38% not even clinically jaundiced at the time of clinic-attendance.
- Unnecessary investigations- 91% and 61% had LFT's and TFT's respectively, which are not recommended by NICE
- September'15- QI project
 An alternative pathway is launched to streamline PNJ referrals



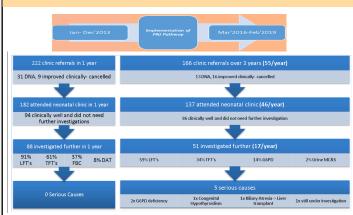


Method

Retrospective data collection performed in May'19 to evaluate the efficacy of the pathway between Mar'16-Feb'19 and to assess for any delay in diagnosing serious pathology.

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Results



Conclusion

- ❖ 75% decline in the number of referrals per annum
- ❖ 80% reduction in number of infants investigated per annum
- ❖ 167 less clinic appointments per annum
- Improving service- efficiency, cost effectiveness alleviating parental anxiety whilst effectively identifying serious pathology

