

Improving the "Time-to-diagnosis" for patients presenting with Gross Hematuria

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Problem Statement

Gross hematuria is the most important presenting symptom for bladder cancer

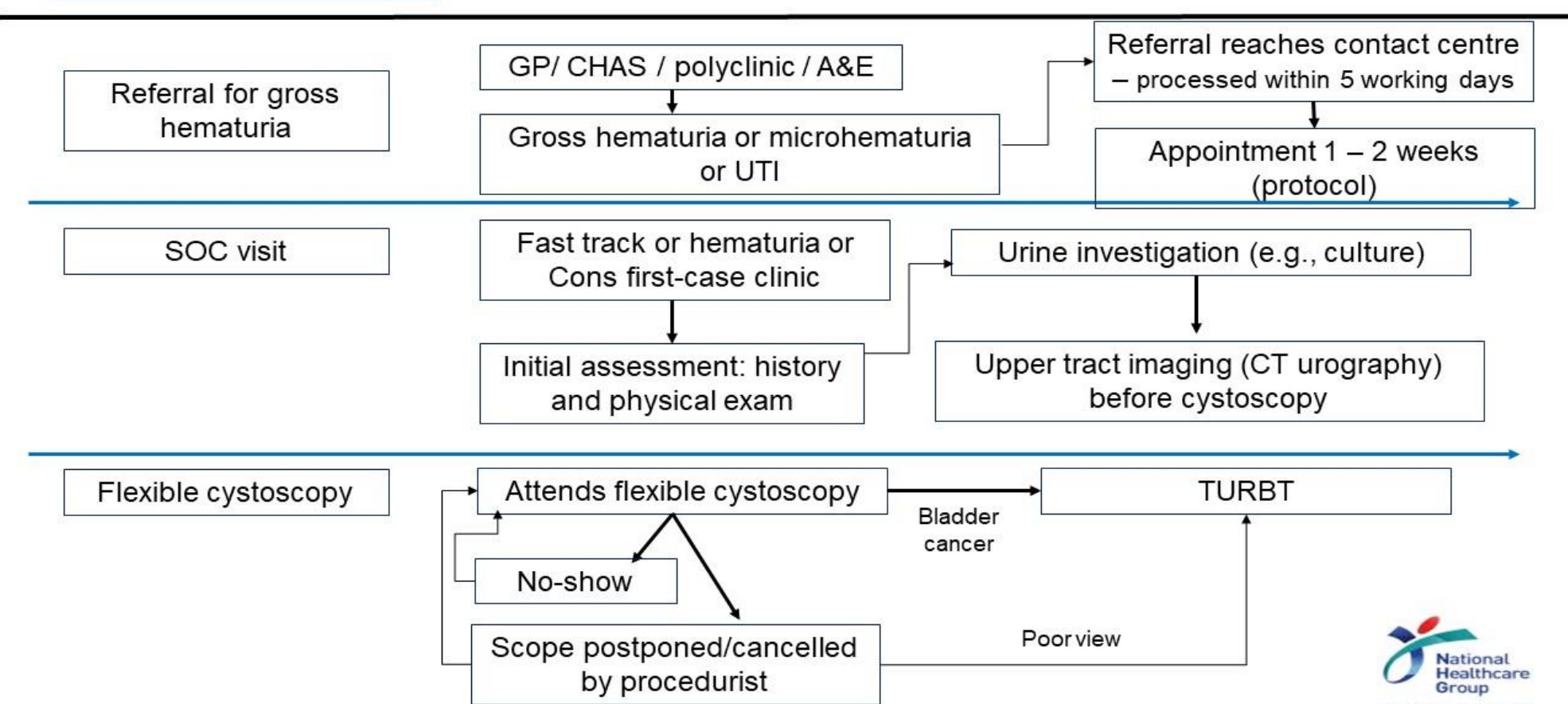
A delay in the diagnosis of bladder cancer increased the risk of death from disease independent of disease stage or tumor grade

A delay between the onset of symptoms and patient presentation to the GP was associated with a poorer prognosis and higher stage bladder cancer (5).

Potential Solutions

Macro view

Micro view



Brainstorming, Fishbone and Pareto Chart were completed with a multidisciplinary team involved in the process flow above. The following interventions were developed:

Problem	Intervention
No show to scope room utilizing scope appts	PDSA 1: Stopped rebooking "no-show" for low-yield conditions PDSA 1.1: Enhanced communication addressing no show reasons
Prioritizing CT urography over flexible cystoscopy	PDSA 2: Perform flexible cystoscopy prior to upper tract imaging

Project Aim

"Within a 6-month period, to increase the proportion of patients who gets flexible cystoscopy within 21-days of referral for gross hematuria to Urology clinic ("time-to-diagnosis") from a baseline of 17.5% to 100%."

**"Time-to-diagnosis" = duration from referral to Urology clinic for gross hematuria to flexible cystoscopy

Lessons Learnt

Domain	Lessons learnt
Problem recognition	<ul style="list-style-type: none"> Compare existing department outcomes with published MOH/International data
Problem solving	<ul style="list-style-type: none"> Involve all stakeholders Following the CPIP workflow: Process mapping (flowchart) / Ishikawa chart / Pareto
PDSA	<ul style="list-style-type: none"> An apparent "patient-factor" problem, such as "no-show", may be due to an underlying physician / admin problem Management protocol can be difficult to reverse
Outcome	<ul style="list-style-type: none"> To analyze process measures, outcomes measures, and economic measures

Outcomes & Impacts

Run Chart: Percentage scope within 21 days



Table: Sustain & Spread Strategies

	Intervention	Activity
Sustaining	MO orientation programme	Incorporate gross hematuria topic into MO orientation and education programme, to be taught early in the posting
	Clinic re-organization	Fast-track clinic and hematuria clinic for protocolized management of hematuria as per guidelines and as per CPIP interventions
Spreading	Problem recognition	Regular audit and review of outcomes, and compare with local and international standards
	Problem solving	Encourage problem solving using the established tools of CPIP