SPOTLIGHT ON STAKEHOLDER SUCCESS

Improved and accelerated diagnostic pathway for patients that present to the emergency department with suspected mild traumatic brain injury

PATIENT	INCREASED SAFETY	33 patients who would have previously been unnecessarily exposed to radiation did not require a CT scan to rule-out mild TBI.
	REDUCED WAIT TIMES	2.01-fold reduction in average wait times for patients who have been ruled-out for TBI, moving from 518 minutes (8.63 hours) to 258 minutes (4.3 hours), saving a total of 132 patient hours over 9 months
CLINICIAN	INCREASED CONFIDENCE	In a survey conducted across our emergency department, 77.8% of those respondents who use the TBI panel (n=9) indicated that the added insights from the panel helped reduce the uncertainty related to the absence of brain lesions, particularly in the non-elderly.
	REDUCED CARE PRESSURES	"Working in emergency departments involves high pressure. Equally high is meeting the expectations of patients and their families. By reducing patient wait times associated with diagnostic tests we minimize the added pressures associated with unfortunate delays directly, or indirectly related to emergency services." — Jose Francisco Vargas Rivas, Head of Emergency Department
HEALTH SYSTEM / ADMINISTRATION	ENHANCED RESOURCE UTILIZATION	10% reduction in CT scans within the first 3 months of implementation, enabling a reallocation of skilled resources to other functional areas and tasks.
		Minimized overuse of limited resources within the emergency department by 143 total hours over 9 months. This translates to an average mitigated cost savings to the health system of €247.79 per patient with suspected mild TBI.
PAYOR	DECREASED HEALTHCARE COSTS	Total mitigated costs for not performing unnecessary CT scans exceeds €4568.85, based on CT costs alone, within the first 9 months of implementation.