

013: EFFECTIVENESS OF AN ASTHMA CLINICAL PATHWAY IN IMPROVING CARE AND MEASURING RESOURCE UTILISATION

Authors:

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Objective:

To assess the impact of an inpatient clinical pathway.

Methods:

Data was collected retrospectively. A total of 67 case records of asthma admissions were reviewed (July to October 1998) prior to the implementation of the pathway. 118 case records of asthma consecutive admissions were reviewed during the pathway period (November 1999 to March 2000). Data was analyzed using SPSS software. Chi-square and Fisher's Exact Tests were used, wherever appropriate to test for association between categorical data. Independent T-test and Mann-U test were performed to test for significant differences in quantitative data. Potential confounding factors were controlled for, using logistic regression.

Data collected included patient demographics, investigations performed, treatment prescribed, readmission, re-attendance to Emergency Department and length of stay.

Results:

The 118 cases treated according to the clinical pathway(CP) were compared with 67 pre-pathway cases. A significant decrease in sputum tests (34.3% pre-CP vs. 18.6% pathway, $p=0.017$) and use of antibiotics(62.7% pre-CP vs. 30.4% CP, $p<0.001$) was observed for patients on CP. The proportion of patients who had their salbutamol reviewed (49.3% pre-CP vs 73.7% CP, $p=0.001$) and oxygen reviewed (25.8% pre-CP vs 73.8% vs CP, $p=0.004$) was also significantly higher for cases on CP. There was no significant difference in the readmission, re-attendance to Emergency Department and length of stay.

Conclusion:

Although the use of asthma clinical pathway did not reduce the readmissions and re-attendance to the Emergency Department, it served as a quality tool in improving care and monitoring resource utilization.