

POSTER PRESENTATION

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Admission of patients with infectious disease at the medical admissions ward, Sygehus Thy-Mors – quality-goals

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Background

In the Electronic Patient Charts at Sygehus Thy-Mors (STM) there is no recording of patient arrival-time, admission-time or time of treatment-start. This makes establishing quality-goals difficult.

Methods

This study analyses admissions with infectious diseases in the period Jan-Feb 2010 to the medical admissions ward at STM. Especially with respect to establishing quality-goals, for the admission of these patients.

Results

The study included 93 patients admitted with infections regardless of the suspected diagnosis at the time of referral. It was found that there was a large discrepancy between suspected diagnosis and diagnosis found at the hospital. 58% was admitted with a suspected infection. 63% of the patients over 71 years were admitted with a suspected diagnosis other than infection, i.e. dehydration, apoplexy etc. There were no records of suspicion of SIRS or evaluation of sepsis-criteria even though 54% of the patients matched the criteria. The conclusion is that sepsis and SIRS are grossly underestimated during admission of especially elderly patients with vague symptoms. ABG was ordered in 42% of cases, lactate in 6%. ABG is most frequently ordered in suspected pneumonia or COPD.

Conclusion

The study establishes three quality-goals: 1) Immediate assessment of SIRS-criteria upon pt's arrival – especially

in elder pt's with no straightforward symptoms and/or diagnosis; 2) 95% of pt's meeting the sepsis-criteria upon admission is ordered both ABG and lactate; 3) 85% of pt's meeting the sepsis-criteria is given i.v. fluids within 30 min. and antibiotics within 60 min.

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