

# METHOTREXATE- LIMITING UNNECESSARY BLOOD TESTS



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## Background

- NI LES demand management report 2017/2018 revealed quite significant blood test ordering within Moneymore Medical Centre. This report suggested that our practice blood requests were 43% higher per 1000 of population when compared with our Northern Trust colleagues
- One such population having blood test monitoring is patients on DMARDs.
- The HSC shared care guidelines for the use of oral methotrexate, specifies the exact requirements for monitoring patients on this medication. These patients appear to be having blood tests taken too frequently and out of keeping with guidance.

## Aim

To reduce the amount of unnecessary blood testing for patients on oral methotrexate.

- Aiming for a 25% reduction by May 2019

## Improvement Methodology

- DATA GATHERING-** An initial search of the system revealed 12 patients on methotrexate. These patients appeared to be having bloods taken on a monthly basis whether indicated or not.
- Discussion with partners-** After consideration it was decided that we could look at this patient population with the aim of reducing unnecessary blood tests and stricter adherence to shared care guidelines.
- Strategy-** We planned to review shared care guidelines with education for both doctors and treatment room nurses being undertaken. Documentation would be made in each of these patients notes and letter sent out with dates for bloods. Treatment room would verbally reiterated plan at next appointment.

## Results of initial data gathering

Initial data gathering revealed this population had on average 66 blood tests per month, compared to the 40 bloods tests per month the shared care guidelines suggested. This was equivalent to 150% what it should have been. Furthermore, treatment room appointments were 177% the expected attendances.

### CHANGE IMPLEMENTED 30/1/2019

#### Outcome Measures

To what percentage have we adhered to the bloods taken as per the shared care guidelines for methotrexate monitoring?

#### Process Measures

Has the change reduced the overall number of treatment room attendances for this patient population?

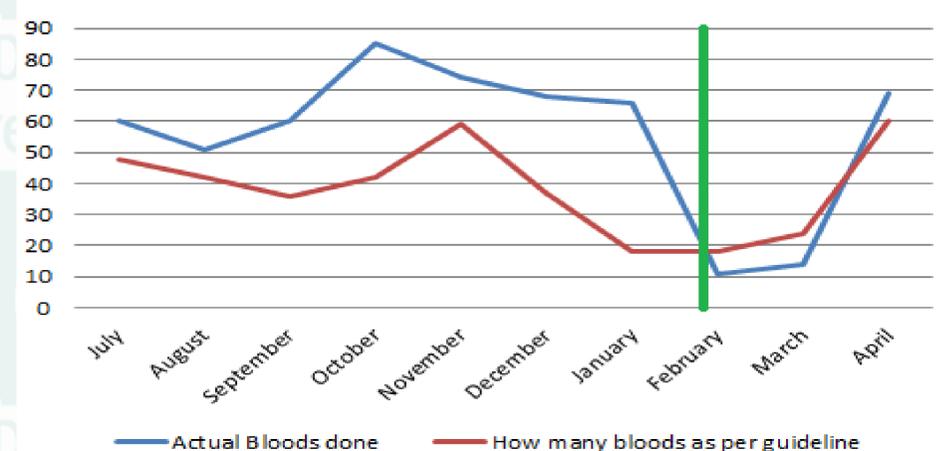
#### Balancing Measures

Could patients be anxious as bloods not being completed as frequently? Could some patients miss required blood tests due to changing regular dates?

## Results post implementation of change

Data was re-collected at the beginning of May- 3 months after change. Blood testing over this period had reduced to 31/month on average compared to 28/month the shared care guidelines suggest. This was equivalent to 110% what it should have been indicating an overall 40% reduction in unnecessary blood testing.

Bloods taken



## Outcome

The aim in this case was achieved with a 40% reduction in unnecessary blood tests. Adherence to shared care guidelines was far more acceptable overall. We were also able to avoid multiple unnecessary treatment room attendances.

## Next Steps

Involvement of pharmacist to consider further cycle in 3 months, ensuring continuation of progress and in particular that patients have not missed bloods they required e.g. if dose changed.

