

Implementing Evidence Based Policies

The Problem

The recent link between gadolinium based contrast media and nephrogenic systemic fibrosis (NSF) in patients with severely impaired renal function requires accurate assessment of a patient's renal function prior to administration of gadolinium based contrast.

Aim/Goal

The goal was to adopt evidence-based policies based on FDA warnings that reduced the risk for patients from developing NSF from gadolinium contrast agents. Once policies were created, processes and tests were systematically implemented.

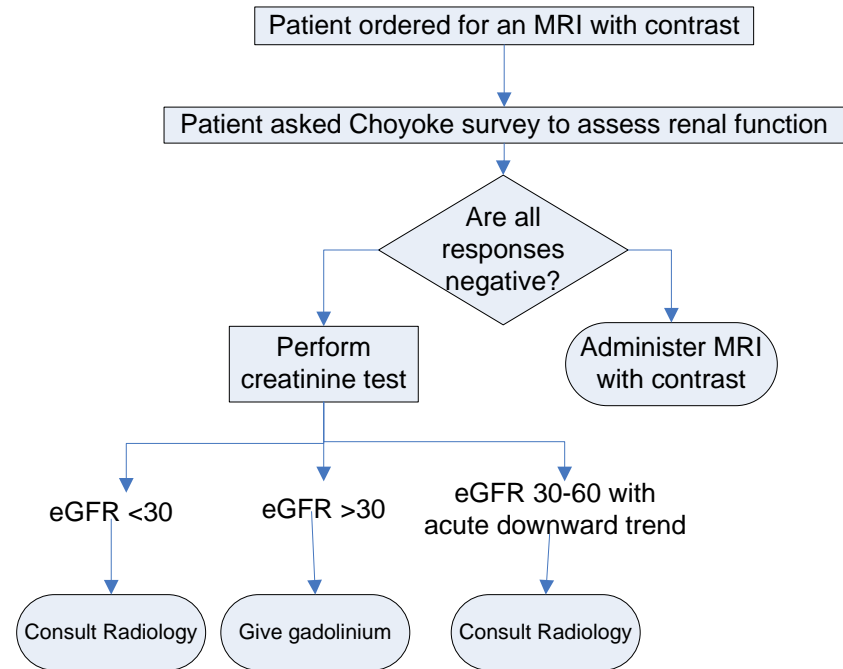
The Team

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The Interventions

- Evidence-based policy adopted detailing thresholds for ordering gadolinium
- Consent form created listing benefits/risks of the procedure
- CCC modified to show laboratory data about renal function
- Screening based on Choyke questions to identify at risk patients
- Point-of-care testing initiated to avoid delay and harm by calculating the estimated GFR
- Application of non-gadolinium protocols

The Results/Progress to Date



Lessons Learned

- Balance of risk of NSF versus benefit of diagnostic information from contrast-enhanced MR study based on clinical evidence

Next Steps/What Should Happen Next:

- BIDMC participation in prospective safety trials for gadolinium contrast agents
- Reassess the reliability of testing algorithm in our practice environment

