



VOICE OF THE CUSTOMER



THE i-STAT SYSTEM HELPS ROCHDALE URGENT CARE CENTRE TO TRIAGE PATIENTS FAST.

Rochdale Urgent Care Centre (UCC), part of the Pennine Acute Hospitals, provides non-emergency services to around 240,000 residents in the communities of Heywood, Middleton and Rochdale and parts of Lancashire.

The UCC treats on average, 4,200 to 4,800 patients a month. Led by a team of six, they provide efficient, clinical care and support to patients who are elderly and frail, present with chest pain, and underlying diseases.

The UCC is open 24 hours for people with minor illnesses or injuries and for those who need urgent treatment. It offers assessment facilities which are a critical support to the local community. Rochdale UCC has been using the i-STAT System, a point-of-care (POC) diagnostic device, to support its patient facilities since it became a UCC when the laboratory service was removed from the Rochdale location.



THE CHALLENGE

The challenge for this busy UCC was how to get blood test results back within the NHS's recommended 4-hour length of stay so they can make better informed diagnostic decisions quickly and remain focused on providing quality patient care.

Prior to the implementation of POC testing and the *i-STAT System*, blood samples were transported to the Royal Oldham Hospital which is located seven miles from the UCC. Staff used one of two methods of getting a blood sample to the hospital; the local hospital transport service, which operates between 8 am and 8 pm or for more urgent samples or for out-of-hours results, a local taxi service, which charges a minimum £8 per ride, and takes at least 18 minutes door to door, which is a time challenge.



THE SOLUTION

Using the *i-STAT System*, the team can more effectively and efficiently triage patients with a variety of symptoms and comply with NHS recommendations regarding timely patient disposition.

The team at the UCC use the *i-STAT System* to measure Urea, Electrolytes and Troponin for patients that present with chest pain, acute kidney injuries, lower limb immobilisations, pneumonia, hyperkalemia, and gastro-intestinal bleeds. The *i-STAT System* tests analyze patient renal function capacity, cardiac markers and electrolytes which help enable rapid diagnosis. The *i-STAT System* also helps support care for elderly and frail patients who require intravenous interventions and those at risk of arrhythmias.

Equally important, once training is completed, the *i-STAT System* can be used by many levels of health care providers, such as advanced nurse practitioners, nurses and healthcare assistants, freeing up other staff to spend more valuable time attending to patient care.

*The results shown here are specific to one health care facility and may differ from those achieved by other institutions.

Rochdale UCC staff use multiple clinical pathways to assess patients. These pathways are shared between the hospitals within the Pennine Acute Trust. This ensures consistency across the wider health network and helps to promote more organised and better evidence-based patient care. The use of the i-STAT System helps accurately assess patients that ‘walk-in’ or are referred from their GP surgeries and allows standardisation of the care process and improves the quality of the care delivered.

“The i-STAT System has been useful in helping myself and my team commence treatment and assess severity quicker and earlier on all our patients. POC testing is making a significant difference and impact to the patients journey especially as we currently have limited facilities. Having POC diagnostics embedded in the service is the most efficient way of working.”

Dr Stephen Gerrard – Clinical Director for Urgent Care Services



CASE STUDY 1



A 78-year-old female with chronic kidney disease and a raised potassium test result. The *i-STAT System* with the CHEM8+ cartridge provided a potassium result within approximately 2 minutes. Results on the *i-STAT System* came back with a confirmation of an elevated potassium of 6.8 mmol/L. The patient was immediately given intravenous calcium as a cardioprotective agent and commenced on an infusion of insulin and dextrose. The use of the *i-STAT System* meant that the patient and staff did not have to wait several hours to receive a blood result from a remote lab and there was no delay in the patient receiving treatment for a time-critical medical condition.



CASE STUDY 2



A 45-year-old previously healthy male presented with night sweats, pyrexia, fatigue and chills. After clinical assessment, the patient was diagnosed with pneumonia. The *i-STAT System* was used to determine that the patient had a severe pneumonia using the CURB-65 scoring system. The patient was treated with intravenous antibiotics and transferred to the Hospital's Clinical Assessment Unit for continuation of his care. Without the use of the *i-STAT*, administration of antibiotics would have been delayed with the patient's health suffering further with potentially life-threatening consequences.



THE RESULT

Incorporating the *i-STAT* CHEM8+ cartridge and Troponin (cTnI) tests early in the patient experience has helped the Rochdale UCC to transform the delivery of care. It allows them to make informed diagnostic decisions about their patients, without having to wait a minimum of 60 to 90 minutes for the laboratory results.

“The i-STAT allows results to be available within minutes, therefore patients can be treated faster without delays of waiting for samples to be processed in the lab. The i-STAT offers good connectivity and features that support governance, such as lockout for non-certified users and to ensure accuracy with QC. This gives us peace of mind as the POCT Team is able to remotely monitor the device, user performance and patient results with a full audit trail.”

Raheela Bibi POC Manager

To learn how the *i-STAT System* can transform your practice, contact your Abbott Point of Care representative, or visit www.pointofcare.abbott



i-STAT

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