

Green Nephrology Awards 2012

Doncaster Renal Unit: Paperless Reporting of Routine Dialysis Haematology and Biochemistry Results

Routine monthly haemodialysis blood tests generate a very large amount of paper results (at least 20,000 sheets of A4 paper per year for the approximately 160 patients on the DBH dialysis program). Such large volumes of paper result in significant clinical and administrative workload and a high risk of relevant reports being missed. All such results are reviewed electronically in the monthly dialysis MDT meetings. Given the costs and lack of utility of paper reports it was agreed with the Trust's medical director that paper reports for routine haemodialysis results could be switched off.

Benefits to environmental sustainability

The annual costs of printing 20,000 sheets of A4 paper (calculated using Hewlett-Packard's online tool) are:

Energy 563 kWh

Paper: 100kg

Energy & paper CO₂ emissions: 380kg CO₂

Energy & paper costs: £120



Reduction in unnecessary paper reports should reduce the risk of important results being lost, with consequent benefits to patient safety.

Additional benefits

Patient safety

Reduction in unnecessary paper reports should reduce the risk of important results being lost, with consequent benefits to patient safety. A recent adverse incident where a microbiology report was not seen was probably in part caused by the excessive number of unnecessary reports.

Administrative workload

Other benefits include freeing up administrative and clinical time and reducing the size and weight of notes (with resulting reduction in the costs of transport and storage and improvements in readability of the notes files).

Details of implementation

The first step was to agree with the Trust's medical director that not having paper results did not create a risk to patient safety or a medico-legal problem.

Once this had been agreed, the Medical Records department were informed to ensure that a record is kept of which notes are affected and what results are not being filed on paper.

The pathology IT manager assigned location codes to each dialysis unit and, in March 2012, set the pathology system to paperless reporting of haematology and biochemistry reports for these locations. Staff in the haemodialysis units and pathology specimen reception were informed of the relevant codes to ensure samples are booked in correctly.



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