

# Study uses decision support to reduce unneeded lab tests

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Diarrhea has many causes, and when there are prolonged or severe symptoms clinicians sometimes consider lab testing to help guide treatment. But sometimes they stray from published guidelines in the direction of overtesting.

Patty Wright, MD, associate professor of Medicine, and colleagues with the Vanderbilt Antimicrobial Stewardship Program examined whether adherence to [diarrhea](#) testing guidelines improved with targeted electronic delivery of decision support to Vanderbilt University Medical Center (VUMC) clinicians at the moment of computerized order entry. Their study will appear in an upcoming edition of the *American Journal of Medicine*.

Beginning in October 2014, a diarrhea testing [adviser](#) activated when clinicians working with VUMC adult inpatients ordered any of various tests commonly used to evaluate diarrhea. After answering a few questions about the patient, clinicians received recommendations for tests and consults. If a patient didn't meet the criteria for a given [test](#), ordering was restricted; override involved approval from an infectious diseases specialist or gastroenterologist.

Over the first 15 months with the adviser turned on, orders per patient per day across adult inpatient areas for stool cultures and for stool examination (for parasites or their eggs) decreased approximately 60 percent.

Soon, decreases also occurred with pediatric inpatients and emergency department patients, which the study authors credit to resident physician cross-staffing and exposure to the adult inpatient electronic adviser.

The estimated annual cost savings came to \$21,931 for adult inpatient testing alone.

Having also tracked total positive test results and the ratio of positive results to tests performed, the authors found that the adviser is not likely to have discouraged appropriate testing.

"Using guideline-based computerized ordering advice helps clinicians take great care of their patients while reducing unnecessary testing, creating a more efficient, less wasteful, and ultimately safer healthcare system. This study was focused on the evaluation of patients with diarrhea but has implications for how we can improve value for [patients](#) with a variety of diagnoses," Wright said.

Provided by Vanderbilt University

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