

# REDUCING NO ADDED CLINICAL VALUE INVESTIGATIONS FOR CHILDREN

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Acute Paediatric Receiving units are busier year on year throughout Scotland. This is not mirrored by either an increase in hospital nor critical care admissions. The commonest discharge diagnosis is "just a virus". With scientific advances and new technologies it is now possible to same day test for viruses in respiratory secretions.

**Just because we can does this mean we should?**



## Asking the Right Questions Matters

To help ensure you have all the information you need to make the right decisions about your care, please ask your doctor or nurse:

- Is this test, treatment or procedure really needed? **No**
- What are the potential benefits and risks? **You find out which virus is present, uncomfortable, expensive**
- What are the possible side effects? **Temporary discomfort**
- Are there simpler, safer or alternative treatment options? **Doing nothing**
- What would happen if I did nothing? **May not recognise flu or mycoplasma which are treatable infections**

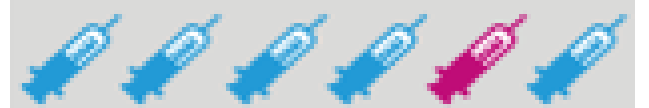


Adapted ward guidance

Nasal Brushings cost £29.80 per sample  
Think carefully – will this change your management?

nasal brushings are recommended in the following situations only:  
Infants < 3/12 or immunocompromised children temperature > 38C  
Clinical features consistent with flu in high risk group  
Clinical features suggestive of mycoplasma pneumonia  
Admission to HDU/ICU with respiratory infection

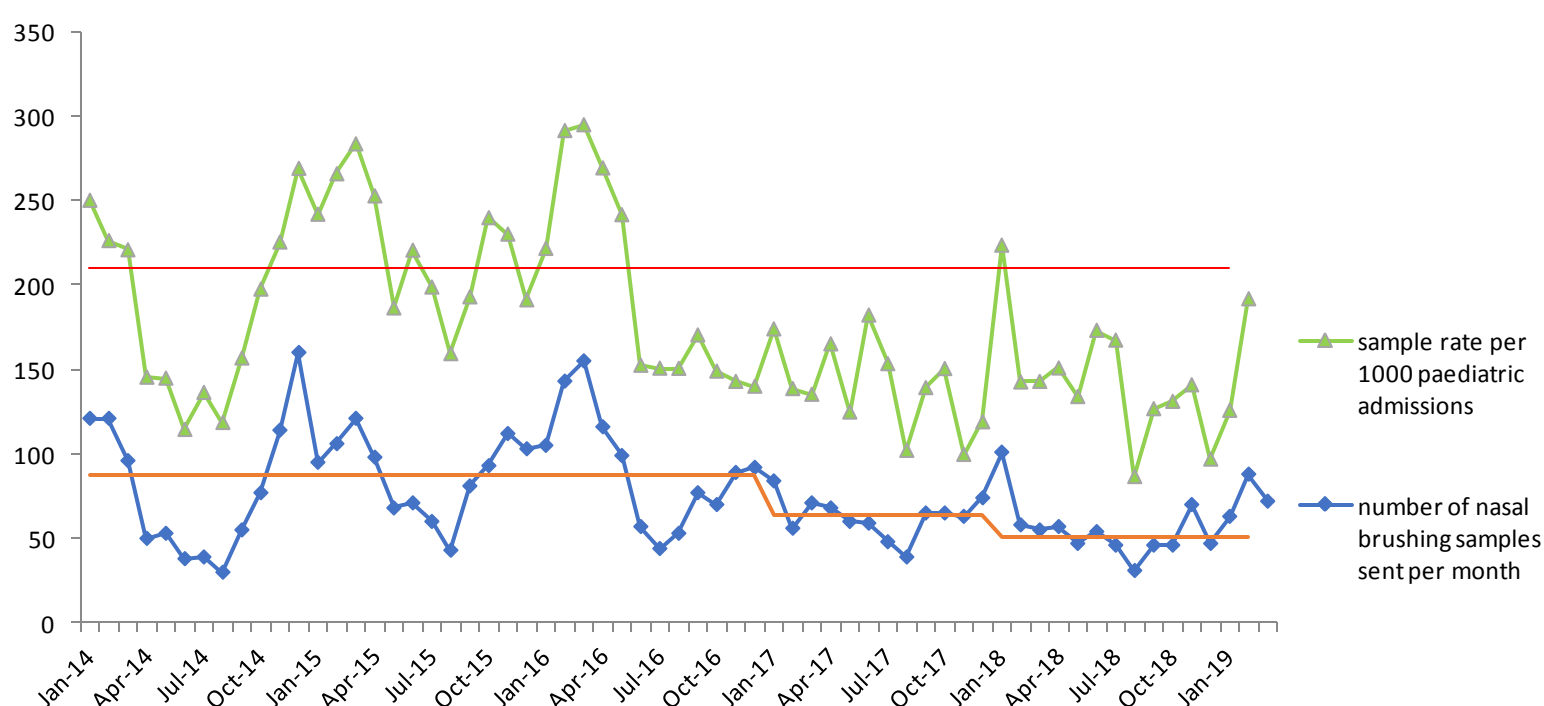
MANAGE RISK BETTER



TACKLE UNWARRANTED VARIATION IN PRACTICE AND OUTCOMES

70% positive swab results  
less than 10% are positive for flu or mycoplasma  
Despite improvements 40% of samples are taken for indications outwith local guidance  
No concern of missed diagnosis by clinicians  
No deteriorating patients/ ICU admissions with unrecognised flu or mycoplasma

respiratory viral PCR samples requested from paediatric unit



**£££**  
**Savings in 2018 compared to 2016 = £13,184 per annum**

**References**

- Drysdale SB, Kelly DF. How to use...respiratory viral studies. Archives of Disease in Childhood - Education and Practice Published Online First: 28 August 2018. doi: 10.1136/archdischild-2016-311858
- Gill PJ, Richardson SE, Ostrow O, Friedman JN. Testing for Respiratory Viruses in Children, to swab or not to swab. JAMA Pediatr. 2017; 171(8):798-804