2023-2025 Quality Improvement Projects

Daniel Casey and Jack Berger	Reduce risk of perioperative acute kidney injury via enhanced communication and volume resuscitation
Lex Holmes	Reduce aggregate number of forwards, chain length and time to completion of asynchronous patient messages at Penn dermatology via nurse triage workflow
Nick Sachs and Moizza Shabbir	By spring 2025, decrease the amount of CT Pulmonary Angiography imaging tests ordered by the Emergency Department physicians and APPs by 5% by implementing clinical decision support and targeted education
Nikita Paripati, Ashley Landesman, Nikhil Illa, Madison McKee	TBD
Nisha Hodge, Emily Sadecki, Aline Le	Improving Hospital Discharge Visit Rates for Patients Discharged to SNF from the Hospital
Farees Saqlain	Improving the Clinical Pathway for Referral for Gastrostomy and Outpatient Follow-up at Penn
Melissa Austin	QI Informatics Approach to Decreasing GDMT Prescription Inequities
Amanda Jurewicz	Reduce the number of safety nets for VBG issues on pulm, GI, and Martin services by 50% and eliminate the ordering of ABG in place of VBG when not clinically indicated by creating a simpler, interdisciplinary process for drawing VBGs
Ottavia Zattra	Reducing Late Hospice Enrollment in Hospitalized Cancer Patients
Abraham Leiser	Decrease the relative risk of having ARDS and not receiving the ARDS bundle of care in the PAH MICU and SICU by 30% by May 2024
Jenna Leigh Miller and Caroline Florence Gentile Kruse	Increase adherence to neurology-made pathway rolled out 1/2023 to >75% by 8/2024
Wajiha Yousuf	Increasing outpatient referrals to the Penn Epilepsy Center
Clare Cutri-French, Kira Bromwich, Eileen Wang-Koehler	Reducing morbidity in benign fibroid surgery
Elaine Hynds	Quantification of blood loss during Cesarean in the OR
Nitya Rao	Reschedule information within 48 hours to all patients who miss an appointment at Scheie Eye Institute between July 1 st 2024, and December 31 st 2024
Kush Panara	Increase the number of patients with completed pre-operative VTE orders to improve peri-operative efficiency by standardizing ambulatory workflow
Palak Patel	Return to Rehab: Optimizing Safe Handoffs from Acute Send-Outs back to Acute Rehab

Trish Ike	By August 2024, time from arrival of 302 initiation to provider evaluation will occur within 2 hours 85% of the time
Christina Boada	Improving the clinical pathway for referral for gastrostomy and outpatient follow-up at Penn
Monica Chelius	Inspection and return patient visit risk reduction initiative
Marjorie Margaux Johnson	Standardizing surgical consents and scheduling
Jayne Rice	Empiric discharge oral antibiotic regimen for vascular patients undergoing podiatric operations for chronic limb threatening ischemia