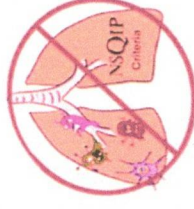


Reducing Rates of Post-Operative Pneumonia Diagnosis in a Tertiary Pediatric Care Center

- Post-operative pneumonia diagnosis rates at the Kaiser Permanente-Oakland Medical Center were in the "High Outlier" range in the "Pediatric" category for several SAR's in a row.
- Chart review noted that most patients who met NSQIP-P criteria for pneumonia did not have a pneumonia clinically



Fig 1. Of 14 cases that met NSQIP-P criteria for pneumonia, 10 were deemed not to have pneumonia clinically



Establishing a reliable system for review of official radiology reads and consistently addressing any noted pathology in report narratives is important for both accuracy of outcomes measures for pneumonia diagnosis as well as good patient care

- July 2021: intervention aimed at minimizing inaccurate pneumonia diagnosis rates
 - Systemic education of stakeholders through staff meetings and rounds with residents about the Pediatric NSQIP program and importance of appropriate documentation to help address our "High Outlier" status
 - Socialization of the concept of Pediatric NSQIP
- We improved our post operative pneumonia diagnosis rates and exited the "High Outlier" category before our target SAR of July 2023

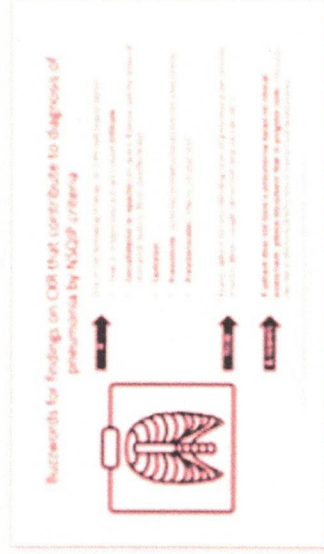


Fig. 2 Handout used to help prompt consistent documentation

Lessons Learned

- Starting small in quality improvement projects and setting reasonable goals helps optimize the chance for success by maintaining team enthusiasm and momentum.
- A systemic approach to quality improvement projects is central to success
- Solving a problem requires a clear understanding of the nature of the problem.
- Investigating a problem can lead to identification of deficits that are important though unrelated to the problem at hand

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