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Labeling Systems, Inc.

NEWS

TimeMed, "Notch" Your Average Label

University of Kentucky Experiences Significant Time and Cost Savings by Deploying v-notch Label

July 2007 - Written in conjunction with Barbara Bush, Laboratory Manager, University of Kentucky

The award-winning University of Kentucky (UK) Hospital is located in the rolling hills of Lexington, KY. It is part of one of the nation's leading academic health care centers, the UK Chandler Medical Center, which encompasses numerous medical colleges, as well as the UK Hospital, Kentucky Children's Hospital and the Centers of Excellence.

Categorizing and controlling the flow of information and materials throughout a hospital is critical, yet can be difficult. For example, a hospital laboratory requires the proper identification of patient samples in order to ensure that the samples can be tracked from the moment they are collected all the way through archiving. A simple mistake can result in an incorrect label, and consequently, a lost sample, an improper diagnosis of a patient's ailment or the wrong treatment.

When Physician Order Entry (CPOE) using Eclypsys Sunrise Clinical Manager (SCM) was implemented at the University of Kentucky (UK) Hospital, our laboratory staff had hoped there would be substantial time savings with regards to accessioning and sample labeling. The process begins with an order placed in SCM, which is processed through our hospital's laboratory information system. Our LIS system determines which labels to print and sends the print command to Cognitive Blaster printers located at each nursing station.

Our first hurdle was familiarizing the patient care staff with the test code mnemonics utilized in the Clinical Laboratories. Secondly, our staff had to redesign the vacutainer tube mnemonics that printed on the labels for easy translation by patient care staff. All that remained was label positioning. In preparation for the order entry process on the floors, we created posters for display at nursing stations, and our lab staff actively participated in the implementation and support post SCM go-live.

Immediately, we recognized a disconnect between the patient care staff and the laboratory with regard to the importance of label placement. The staff focused on correct patient identification without regard to label orientation. The tubes would come into the lab labeled in ways that made it difficult for the bar code scanners to effectively scan tubes' bar codes. As a result, the laboratory staff was forced to re-label more than 90 percent of the tubes they received.

A year after implementing CPOE, we created a multidisciplinary SCM committee co-chaired by the lab manager and a nursing manager to address many of the difficulties associated with such a huge change in process. The committee was introduced to TimeMed's v-notch labels. The v-notch labels, developed in conjunction with Becton, Dickinson, & Co to be used on the BD Vacutainer® blood collection tubes, help to reduce errors caused by misaligned labels. TimeMed's v-notch label can be designed and printed to work effectively with any existing information system. [Click for Product Info]

The Committee recognized that reeducation would again be a critical part of the v-notch label implementation plan. The committee created a variety of teaching tools, including posters and surveys and met with every nursing committee and council in the hospital. Flyers were also given to staff on payday.

The committee found a lack of inventory centralization as each department was managing its own inventory and ordering. The committee also found more than 180 extra rolls of the labels tucked in remote cabinets on the floors!

After 18 months of educating our staff, collecting data, and proposing centralized ordering for lab labels through materials management, our Value Analysis Committee approved the TimeMed v-notch label for use with our LIS system (Misys).

The TimeMed label system has been seamlessly integrated with our current information system, and is being used as part of our ongoing labeling education efforts. As a result of deploying the v-notch label, our lab staff is now re-labeling less than 10 percent of the tubes they receive, and we are experiencing significant time and cost savings.

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