

Improving Identification and Documentation of Patients Utilizing Insulin Pumps at MD Anderson Cancer Center

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Objective:

Patients utilizing insulin pumps at MD Anderson are seen across various clinical settings and there was no clear policy in place to dictate the evaluation management of these patients during inpatient admission. We developed a multidisciplinary group to create an insulin pump policy with goal to improve appropriate identification of patients utilizing an insulin pump during inpatient stay.

Method:

We established a multidisciplinary team of stakeholders including Nursing, Diagnostic Imaging, Clinical Effectiveness, EPIC support, Pharmacy, Endocrinology, Perioperative Service, Nursing informatics and Clinical Informatics with focus on use of insulin pump during inpatient admission.

The inpatient insulin pump policy was put into effect on June 2017 and included documentation of patient and provider insulin pump agreement form, and insulin pump record to document insulin boluses administered via patient through insulin pump. The policy also clearly outlined the roles of nursing, primary team provider and Endocrinology consulting service in management of patients with insulin pump to give clear delineation of responsibilities, including specific instances when Endocrinology service needed to be notified to ensure patient safety. External Medical Devices section was created in electronic health record for central location to document presence of insulin pump.

Conclusions:

Since the initiation of the insulin pump policy the number of patients identified with insulin pump related diagnosis on their problem list has increased from 92 prior to policy implementation to 269 patients in 2019 (192% increase). Of admitted patients, there was insulin pump identified as a diagnosis on hospital problem list in 23 patients prior to policy implementation in comparison to 67 in 2019 (191% increase). There has been an increase in safety event reporting surrounding insulin pumps due to increased awareness.