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Pacemaker Follow-up Done in Nursing and Special Care Homes

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Rationale for the project

- When: Initial project began in August 2015
- Who: Nursing and Special Care Home Residents
- Why: Delays in transfer (risk), Residents/ Family refusal to attend pacemaker follow-up due to obstacles (mobility, confusion, etc.)



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The Goal of the Project or Strategy

- To maximize the number of residents receiving pacemaker follow-up services
- To reduce associated risks for residents requiring travel for pacemaker follow-up
- To improve services to this vulnerable population and care providers



Measures

METRIC	Aug-15	Oct-15	May-16	TARGETS	Results Jun 2016
Total # of patients in data base	84	84	80	84	80
# patients seen	79	51	54	84	105
# patients refused follow-up	5	0	0	0	0
# of Nursing/Special Care Homes visited		16	29	23	45
# of day trips made by RCT		5	6	10	11
cost for RCT		\$160	\$255	< \$3800	\$415
Potential savings (Due to no Ambulance NB transfer)		\$97,716	\$103,464	\$200,000	\$201,180
# calls made to Cardiologist by RCT		0	0	0	0



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Tips & Tools for Others

- Strong physician support at the local level and at Medical Advisory Committee
- Physician billing code for review has been a challenge, currently limited to salaried physicians, working with Medical Society advocating for a remote monitoring billing code



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Tips & Tools for Others

- Have a Cardiologist available for trouble shooting
- No additional staffing resources or shifts required (Registered Cardiology Technologist already scheduled to work)
- Organize follow-up 1 week in the Fall and 1 week in late Spring:
 - to avoid winter conditions and summer vacations
 - limits number of trips and time away from hospital



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