

Optimizing the Management of Emergency Department Patients with Atrial Fibrillation

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Background

Atrial Fibrillation is the most common cardiac dysrhythmia in adults. Greater than 70% of patients admitted with AF enter the system through the emergency department.

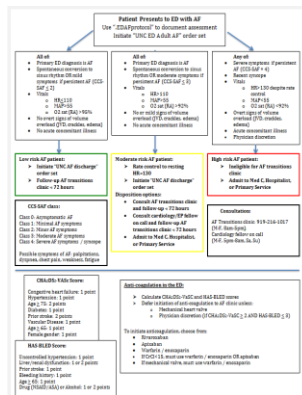
From January to June 2015:

- 100 patients presented to the ED with primary AF
- 81 of these patients were admitted
- Average LOS of 3.0 days

Education

- July of 2015 - protocol to triage and discharge patients who present to the ED with AF was launched
- An ED evaluation template was created to guide providers through their ED assessment
- Prior to ED d/c, all AF patients were provided a date and time for clinic f/u (within 72 hours)
- The AFNC coordinated training sessions for all ED staff

ED Pathway



ED Atrial Fibrillation Nurse Coordinator

Education, Implementation, and Quality of Care

Implementation

- Create novel pathway from the ED to an Atrial Fibrillations Clinic to coordinate care, modify risk factors, and promote patient self-care
- Reduce unnecessary AF hospital admissions
- Improve quality of AF care

Quality of Care

- The AFNC tracked all referrals for compliance.
- All ED providers received closed-loop communication from AFNC and clinic providers regarding patient's clinic visit.
- All "no show" patients were attempted contact by AFNC to reschedule.

Results/Outcomes

From July 2015-March 2016:

- 98 patients presented to the ED with a primary diagnosis of AF
- **The admission rate was reduced from 80.7% pre-implementation to 51.7% post-implementation ($p < 0.001$)**
- 57 total patients seen in AF Transitions Clinic (37 pts with primary AF)
- Mean time to clinic visit = 3 days
- 67.8% of patients had f/u in 24 to 48 hours
- 1 patient did not attend clinic visit

There has been a successful implementation of a novel care pathway to triage and discharge AF patients from the emergency department, with early, specialty care follow up. This pathway has dramatically changed practice and can serve as a model for implementation of similar pathways for other chronic diseases.