

Is it Really Flu?

Cutting Emergency Dept. Costs with Bedside Rapid Molecular Tests

As the U.S. struggles with rising healthcare costs, payers and healthcare providers are looking for ways to reduce waste, and make patient care more efficient and more effective. One place especially ripe for improvement is the Emergency Department (ED), where unique challenges include high patient volumes, acute illnesses, critical emergencies, incomplete medical histories and difficulties in patient follow-up.¹

Researchers at the University of Minnesota and Hennepin County Medical Center in Minneapolis, MN, conducted a prospective study of 143 patients to determine how rapid RT-PCR influenza testing—with results in fewer than 30 minutes—influenced the decisions physicians made in the ED. These decisions included when to admit or discharge patients, refer patients for medical procedures, write prescriptions for antivirals and antibiotics and order further laboratory tests.¹

Published in early 2018, the team found that a rapid influenza diagnosis changed the course of patient management in 61 percent of cases, as compared to what the physician planned to do before diagnosis. The total cost savings of on-the-spot testing was approximately \$200 per ED visit, mostly due to deferral of admission for patients that were found to be safely discharged.¹

Glen Hansen, MD, assistant professor of medicine at the University of Minnesota and medical director for the clinical microbiology and molecular diagnostics laboratory at Hennepin County Medical Center, led the study. In their paper, he and co-authors concluded that “diagnostic support is an important factor in supporting efficient patient care while helping to limit healthcare costs.”¹

ED Point-of-Care Testing

Rapid Molecular Testing of Flu/RSV



18%

**Fewer tests
to perform**



17%

**Fewer
Antibiotics
Prescribed**



\$200-669

**ED Savings
per Patient
Visit**

References

1. Hansen GT, et al. Clinical decision making in the emergency department setting using rapid PCR: Results of the CLADE study group. J Clin Virol. 2018 May;102:42-49.
2. Rogan DT, et al. Impact of Rapid Molecular Respiratory Virus Testing on Real-Time Decision Making in a Pediatric Emergency Department. J Mol Diagn. 2017 May;19(3):460-467.
3. Liang SY, et al. Infection Prevention in the Emergency Department. Ann Emerg Med. 2014 Sep; 64(3): 299–313.