Implementation of Clinical Decision Support for the Prevention of Perinatal Group B Streptococcal Disease: A Quality Improvement Perspective

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Study / Results:

A literature search of clinical decision support, computer-based tools and their affect on clinical practice. An example of one of these high level tools is the CDS involved in the prevention of neonatal Group B streptococcal disease as an example of advanced CDS features and their affect on clinical practice.

The CDC prevention of Perinatal Group B Streptococcal Disease: A Quality Improvement Perspective

Plan:

The GBS prevention tool was selected as a representative CDS because there is a well-documented, but complex guideline under which the CDS could be built, the CDS integration into the EHR at LVHN demonstrates the challenges of implementation, and room for improved outcomes for GBS disease still exist. A recent review of early-onset GBS cases, GBS disease in neonates less than seven days old, found that 25% of the cases contained at least one implementation error in the use of intrapartum antibiotics when indicated.

The LVHN Department of Obstetrics and Gynecology is currently studying the clinical effectiveness of the implemented CDS in improving the delivery of guideline concordant GBS prophylaxis. The retrospective cohort study will compare how patients in labor were treated for the prevention GBS prophylaxis in the 6 months prior to the implementation of the CDS for six months compared to a similar time period prior to the availability of the CDS system. Characteristics of the GBS prevention tool that may have influenced its effectiveness will also be evaluated using literature review.