



# Optimizing access to care for new cancer patients discharged from an Observation Unit

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### Background:

- In the US many patients first attempt to access oncology care through emergency departments (ED) with worse survival rates<sup>1</sup>.
- Each year ~ 33,000 cancer patients new to our institution present to the ED, and often are placed on observation.
- These patients experience significant delays in receiving oncologic care, only 3% received a follow up appointment within 2 weeks.

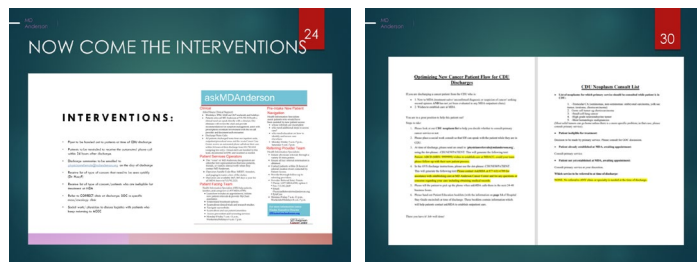
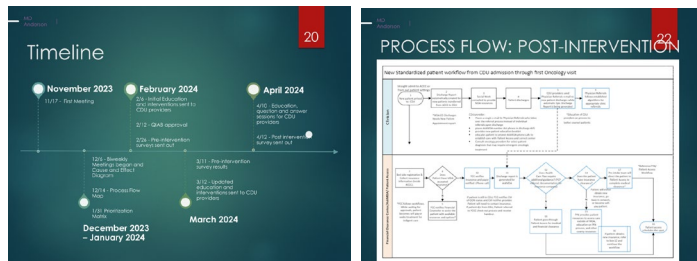
### Aim:

- Increase the number of patients receiving outpatient oncology care within 2 weeks of discharge by 10%

### Methods:

- Population: patients place in observation with suspicion of cancer, diagnosed but treatment naïve, 2nd opinion or couldn't wait until appt
- Process mapping, fishbone, impact v effort matrix, provider survey

### Interventions:

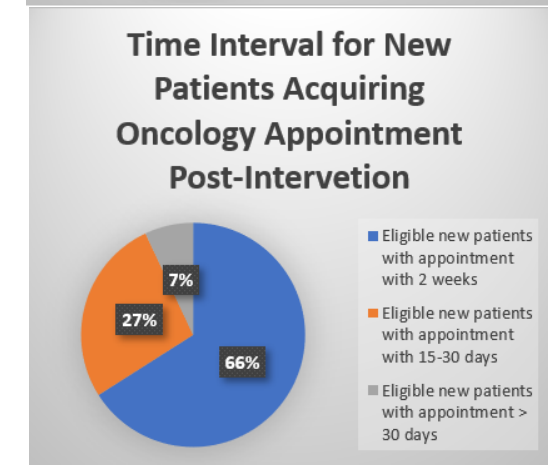
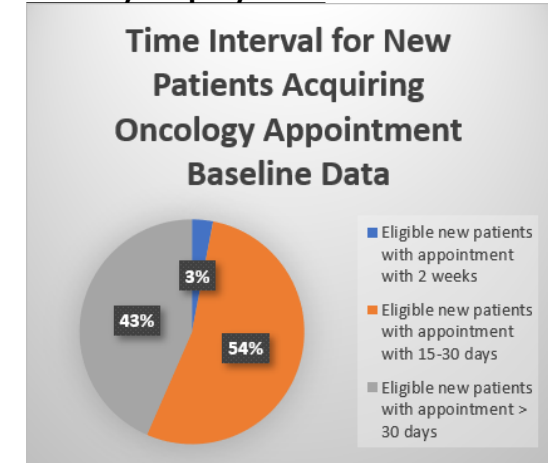


Streamlining the referral process through a centralized service with referral algorithms, automating requests and educating both providers and patients on these procedures are means for expediting oncologic care without increasing provider staffing.

These measures increased the percentage of patients receiving follow up within 2 weeks from 3% to 66%.

Further research is necessary to assess whether expediting follow up cancer care for new patients improves clinical outcomes and relieves associated stress.

### Results/Graphs/Data:



### Future Directions for Research:

- Continue to collect post-intervention data, assess provider satisfaction, .
- Extend intervention from observation unit to EC for patients discharged from hospital.

### References:

1. Delamare Fauvel A, Bischof JJ, Reinbolt RE, Wehling VK, Boyer EW, Caterino JM, Wang HE. Diagnosis of cancer in the Emergency Department: A scoping review. Cancer Med. 2023 Apr;12(7):8710-8728. doi: 10.1002/cam4.5600.