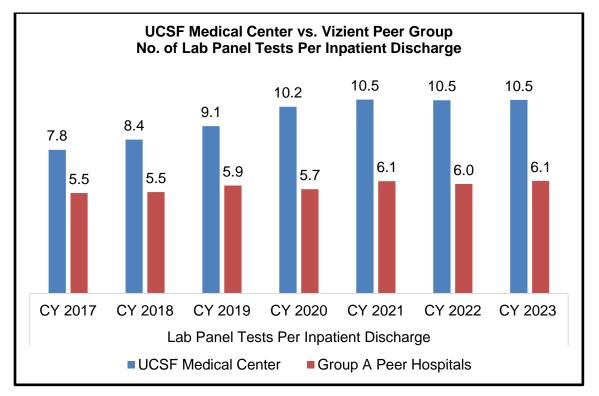
APPENDIX - Caring Wisely: Reducing Unnecessary Lab Testing



Appendix 1. UCSF Inpatient Lab Panel Testing Compared to Peer Hospitals

NOTE: Group A hospitals include large AAMC teaching hospitals with a Case-Mix Index over 1.25 and all cancer & children's specialty hospitals.

Appendix 2. Anticipated ROI Based Upon Test

			Direct Cost	Estimated	
	Annual	Opportunity	Savings per	Annual Cost	
Test	Volume	for Reduction	Test	Savings	Description
					We estimate that of the 136,000
					annual inpatient CBCD tests, we can
					convert ~10-30% (13,600-40,800) to
					CBC. There are already 6-7%
					confirmed CBCDs that are likely
					unnecessary (ordered within 24
					hours), and we predict there are
					more. At \$10 saved per conversion:
CBC with				\$136,000.00 -	\$10*13,600 = \$136,000 to \$10*40,800
differential	136,000	13,600 - 40,800	\$10.00	\$408,000.00	= \$408,000
					We estimate that of the 3,000 annual
					inpatient prealbumin tests, 60-80%
					(1,800-2,400) can be avoided with CDS
					and education. There are some
					providers who may feel prealbumin is
					a key inpatient lab test, such as
					Nutritional Services. At a cost of
				\$20,610.00 -	\$11.45 per test: \$11.45*1,800 =
Prealbumin	3,000	1,800 – 2,400	\$11.45	\$27,480.00	\$20,610 to \$11.45 *2,400 = \$27,480.
					We estimate that of the 3,500 annual
					inpatient free T4 tests, we can avoid
					60% (2100) tests. At a cost of \$2.14
Free T4	3,500	2,100	\$2.14	\$4,494.00	per test*2100 tests = \$4,494.
				\$161,104.00 -	
				\$439,974.00	

NOTE: Cost Savings per Test derived from direct costs as provided by Clinical Lab estimates

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