

2020 *Choosing Wisely* Champions

The *Choosing Wisely* Champions program, in collaboration with the American Board of Internal Medicine (ABIM) Foundation

- **Recognizes** individual clinicians for their contributions to the *Choosing Wisely* campaign;
- **Inspires** other clinicians seeking to implement *Choosing Wisely* in their own practice;
- **Provides** society partners an opportunity to celebrate members' contributions to the campaign;
- **Demonstrates** how the campaign is driving change in health care; and
- **Helps** clinicians learn from one another by highlighting exemplars.

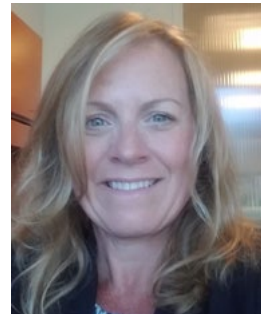
This year's ASCP *Choosing Wisely* Champions include a team from one institution and two individual physicians.

Quest Diagnostics Lab Stewardship Reference Program



Erin P. Monteverdi - Representative

The Quest Lab Stewardship Reference Program supports the implementation of *Choosing Wisely* guidelines in clinical practice settings across the country. Quest Diagnostics serves more than half of all prescribing physicians and hospitals, which enables Quest Lab Stewardship to have considerable national reach. Quest Diagnostics has provided customers with a complimentary view into their send-out testing laboratory ordering practices with Quest Lab Stewardship Reference. Insight from Quest Lab Stewardship Reference supports health systems and hospitals with managing and monitoring any interventions associated with guideline education needs and helps them focus on targeted areas where adherence gaps are identified. Quest Lab Stewardship has executed five codable rules across 397 healthcare organizations and includes more than 23.5 million laboratory orders. Quest Diagnostics has provided access to the *Choosing Wisely* recommendations through links and citations in the complimentary products they offer, as well as referencing these rules as part of a utilization review of ordering practices. The Quest Lab Stewardship platform provides health systems a concrete, near-time measurable view into their adherence to codable guidelines. Orders are directly measured against adherence. Lastly, Quest Diagnostics has served as an ambassador for the *Choosing Wisely* campaign through discussion and participation in best practice groups.



Sachin Gupta, PhD, MBA, MT(ASCPⁱ)MB, Lean SSBB

Laboratory Quality and Informatics Lead,
BayCare Health System,
Clearwater, FL

In his role as Laboratory Quality and Informatics Lead at BayCare Health System in Clearwater, Florida, Sachin Gupta, PhD, MBA, MT(ASCPⁱ)MB, Lean SSBB, manages and makes improvements in laboratory processes. For the past five years, Dr. Gupta—who has a PhD in molecular pathology and is certified as a Lean Six Sigma Black Belt—has been involved in more than 20 quality improvement initiatives at BayCare Health System. Some of these initiatives include reducing overutilization of CT chest angiography using a pre-test probability clinical decision tool and D-Dimer for the diagnosis of pulmonary embolism and appropriate use of C. Diff PCR and MRSA PCR tests using evidence-based guidelines and clinical decision support tools to guide treatment. Dr. Gupta takes a broad view of laboratory data, identifies significant trends and studies health information to effectively improve patient safety and clinical outcomes. His work improves overall patient care and helps in reducing the cost of health care. Dr. Gupta and the quality improvement team at BayCare Health System often utilize *Choosing Wisely* recommendations as part of evidence-based, best practice guidelines.



Eric A. Gehrie, MD

Medical Director of Blood Bank,
Johns Hopkins Hospital,
Baltimore, MD

Eric A. Gehrie, MD, FASCP, is an assistant professor of pathology at Johns Hopkins University School of Medicine, in Baltimore, Maryland, where he is also the medical director of the Blood Bank, associate director of the Pathology Residency Program and associate director of the Patient Blood Management Program at Johns Hopkins Hospital. Dr. Gehrie's work with platelet transfusion demonstrates appropriate use of blood products is essential for maintaining a safe and evidence-based clinical environment. Despite multitudes of studies comparing liberal versus restrictive red blood cell transfusion strategies, there remains a paucity of data for platelet transfusion requirements, especially in high-use patient populations like oncology. To examine the daily use and necessity of platelet transfusions in the adult oncology group, Dr. Gehrie has studied the clinical difference and impact between 1-unit platelet transfusions and 2-unit platelet transfusions. His two year retrospective review demonstrates that the routine use of 2-platelet transfusions per patient provided no benefit over a single platelet transfusion. His study stands as a singular example of judicious use of a limited biologic product-platelets. His research recognizes the importance of reducing unnecessary platelet transfusions; patients are exposed to fewer donors, hospital platelet inventories remain intact for critical patients, and the financial budget for the blood bank remains fiscally solvent.

