

# ECRI Institute's Blueprint for Healthcare Technology Success



July 17, 2017

Let's talk clinical labs, fleet equipment, and cancer care centers

As the Association for Health Resource and Materials Management (AHRMM) conference quickly approaches, we're focusing on planning and procuring challenges for this issue.

My colleagues share some insight about working with clients on clinical labs, telemetry monitoring, an ambulatory cancer care center, mobile fleet equipment, and robotics.



I'd also like to use this space to tell you about our new [CapitalNavigator™](#) service, which assists healthcare organizations with that perennial challenge of prioritizing and approving capital budget requests.

All too often, capital budget committee members lack the technical expertise that's needed to make clear decisions. CapitalNavigator solves that by putting one of our independent technology experts at the table during your budget meetings. This ensures that hospital leaders make the best possible decisions for their capital dollars.

On that note, we'd love to chat with you at AHRMM. Make sure you visit us in Booth 837.

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What to Consider When You're Considering a New Clinical Laboratory

The clinical laboratory is a complex space that is essential to nearly all patient care in a hospital setting. Replacing clinical analyzers is not an easy process, as different suppliers often do not have matching test menus and use different assay methodologies. Additionally, unique quality control measures in the lab make it difficult to implement new technologies.



Watch our latest "Here and Now" video below with ECRI's **Natalie Abell** and **Rob Maliff** to learn how we can help you with your clinical laboratory needs.

### Video: Challenges in Clinical Lab Planning



### Let's Talk Capital at AHRMM (July 24-25)

ECRI Institute is [exhibiting](#) at the Association for Healthcare Resources and Materials Management (AHRMM) in Washington, DC, July 24-25.

Stop by **Booth 837** to learn how you can select or invest in the safest, most cost-effective healthcare technologies and projects for your organization. As always, we welcome discussion about whatever technology or system-wide challenges you're facing now or anticipate in the future.

Hope to see you at AHRMM!

## Expanded Telemetry Monitoring Project: What's Available? Which Suppliers Are Best?

Our physiologic monitoring experts recently led an academic medical center through an evaluation of current telemetry systems to find suitable partners for a replacement system.

The medical center had been experiencing signal dropouts, which is a very big patient safety risk, as critical information on patient status could be delayed, or worse, never relayed to the primary caregivers. The replacement telemetry system had to cover an extremely large footprint—approximately 1.8 million square feet over 11 connected buildings.

After meeting with key stakeholders and narrowing the list of potential suppliers down to three, we coordinated webinars and calls with the medical center's team and suppliers. ECRI addressed issues such as future-proof technology, workflow enhancements, infrastructure requirements, and most importantly, patient safety, rather than basic monitoring abilities such as ECG and spO2 ranges.

With this clear understanding of the available telemetry platforms, the medical center received funding approval from its board for the new, greatly upgraded telemetry system to meet its needs.



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## Bringing Cancer Care to the Community

Planning a large space that provides a wide range of procedures comes with significant challenges in planning, budget control, and logistics. These large spaces are much different than run-of-the-mill renovation projects, and require constant communication between all parties, including owner, construction manager, clinical user, and medical equipment planner.

Recently, our medical equipment planning team wrapped up a project for a new ambulatory cancer care facility—a three-story, 400,000 square-foot complex that provides imaging, infusion, radiation, surgery, and many other services.

The project, which we managed via two client-based systems to ensure timely, on-budget delivery and implementation, required procuring over \$25M in equipment through more than 500 purchase packages.

Through our deep involvement with the client's clinical users—who were also world-renowned researchers—and its project management office, we guided the procurement process all the way to first-patient use, despite several changes in clinical programming and leadership over the three years of the project.

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## Mobile Fleet Equipment Management

As more hospitals see an increase in census numbers, ECRI Institute often fields questions about how best to manage equipment shortages and use their fleet of mobile equipment more efficiently and economically.

The first step is to assess whether centralized management is preferred over keeping one device at each bedside or in the clinical unit. By conducting needs assessments for a variety of mobile/portable devices, we can help determine how many fleet items are really needed, and whether it's necessary to rent equipment during times of high census. We also review workflow processes to ensure that they have clean equipment ready and available when they need it.

One solution to equipment shortages may be the use of a real-time location system (RTLS). While many hospitals have deployed an RTLS to improve fleet management, they still face their own set of challenges such as cleaning dirty equipment, dropping off clean equipment, and redistributing equipment.

Feel free to call us with your questions—we have no shortage of ideas.

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## Curated Corner: Robots Everywhere!

Choosing the right da Vinci system platform, or figuring out which specialty procedure robots will best support your clinical programs, isn't always easy. However, surgical robots are at the vanguard of modern medicine, so ignoring them is not an option.

I'd like to quickly address a recent article from medGadget.com, "[Flex Robotic System, a Snake to Navigate Colon for Transanal Endoscopic Procedures.](#)" which highlighted some new transoral and transanal robots.

These new robots not only present capital funding challenges, but also issues with physician credentialing and privileging, infection prevention, clinical user training, device maintenance, and support. All of these should be evaluated in the capital request for any new robotic technologies at your hospital.

Has your hospital joined the robotic age? Join our [LinkedIn group](#) and let us know how your hospital has addressed the issues surrounding surgical robots used to deliver or perform patient care.

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