

Interim VeinViewer Study at Mercy Hospital Shows Greater Than 30 Percent Reduction in Medically Unnecessary PICC Placements in Neonatal Intensive Care Unit

Business Wire

Christie Medical Holdings, Inc., a global leader in mobile vascular imaging systems, and Mercy Hospital Oklahoma City today announced the completion of a 210-patient prospective clinical study in the health center's Neonatal Intensive Care Unit (NICU). The study evaluates whether using VeinViewer® impacts the rates of medically unnecessary PICC placements and the number of attempts to insert peripheral intravenous (PIV) catheters.

"Even with a new facility, increased patient census, more nurses and formal training on manual placement of IVs, the NICU department prior to the study faced high rates of IV attempts per patient and a high level of medically unnecessary PICCs. We wanted to improve our rates to deliver better patient care and implementing VeinViewer is one way we are doing this," said Michele McEver, NICU nurse manager at Mercy Hospital Oklahoma City.

Prior to the study, Mercy Hospital Oklahoma City's NICU department documented a baseline of non-VeinViewer vascular access experiences and estimated the average to be 5.2 IV sticks per child with some children having double-digit attempts. The baseline rate of medically unnecessary PICCs was one for every 13 patients (1:13).

An analysis of data from the first 100 patients showed the number of IV sticks per child dropped from 5.2 to 3.1 with the use of VeinViewer. Similarly, the ratio of medically unnecessary PICCs decreased from 1:13 to 1:25, a 48% reduction. The data from this interim analysis was presented in San Antonio, Texas at the Association for Vascular Access (AVA) meeting in October 2012.

"We were pleased with the interim results that saw a significant decrease in both medically unnecessary PICC lines and peripheral IVs," said Dawn Norman, director of regulatory, quality and clinical affairs for Christie. "Not only does VeinViewer make it much easier to find the extremely difficult veins in babies, but relieves them from some discomfort and pain, which is very important to us. We look forward to the release of the final results." "There is a great potential for return on investment with the average cost per PICC line, including materials and cost to place it, of about \$700," noted Chris Schnee, general manager and vice president of sales and marketing at Christie. "This interim analysis demonstrates VeinViewer's ability to decrease unnecessary PICCs by at least 30 percent and is the only platform of products on the market that has proven this critical result. With the CMS ruling that secondary, nosocomial catheter related blood stream infections (CLBSI) are non reimbursable, the simplest method to reduce the potential risk and compounded

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cost of such events is to directly reduce the number of medically unneeded PICCs lines. Only VeinViewer can provide pre-, during and post-access benefits throughout the entire vascular access procedure and has been shown through clinical studies to increase both first stick success and patient satisfaction up to 100%.

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