Lymphoma DAP Reduces Time to Diagnosis and Treatment

By Graham Young

A new Diagnostic Assessment Program (DAP) developed for lymphoma patients has cut the time from first symptom to diagnosis, which allows patients to receive earlier treatment and improve their chances of a positive outcome.

The team developed a new clinical pathway that maps each patient’s journey from first symptom to diagnosis. The team also developed an alternative approach to obtaining the biopsy sample necessary for diagnosis. The new method guides needle core biopsy in the patient’s home, decreasing the need to bring patients to the hospital, reducing patient anxiety, and improving their diagnosis journey.

“Traditionally, at the Health Sciences Centre, diagnosis of lymphoma requires a patient to make a visit to the Health Sciences Centre for two or more procedures to obtain the necessary diagnostic tissue sample,” said Georgia Carr, Leader, Lab/Flow Cytometry, Pathology, and Diagnostic Imaging/CT. “This technique provides the diagnosis at home, allowing patients to receive early treatment to their cancer. The DAP is a truly a team approach, requiring the participation of the Outreach, Pathology, and Imaging teams in the process.”

The team worked closely with the Lymphoma DAP to develop a multidisciplinary approach to providing quality care to patients and getting patients to the lab for testing. Patients are referred for a consult appointment with a surgeon and then booked for the next available appointment. The patient also receives care from their own primary care physician. Patients also require referrals to the lymphoma program, which requires three days for a visit to the lab. This means that the DAP team can take up to six weeks from the patient’s referral date to diagnosis.

A group of physicians from Oncology, Pathology, and Diagnostic Imaging agreed that time to diagnosis de-trended with the DAP approach. “The DAP is the first step in a unique method of image-guided core needle biopsy, a procedure that is faster and more comfortable for the patient,” said Karen Rybak, Manager of Corporate Rate Utilization and Admitting.

The team piloted an alternate approach to obtaining necessary diagnostic tissue per-13


Nurse-Led Outreach Team: Providing Care Closer To Home

The dedicated Nurse-Led Outreach (NLO) team visits patients at their homes. “This program allows for earlier diagnosis and treatment of patients,” said Greg Henderson, Nurse Practitioner. “This program provides a unique opportunity for patients living in Thunder Bay, Kenora, and the surrounding area to receive care in their own homes.”

The NLO team is made up of three registered nurses: Cathy Campbell, Nurse Practitioner; Audrey Quirion, Diagnostic Assessment Program Lead; and Marisa Kubinec, Lab/Pathology. The team provides care in the patient’s home for lung, breast, colorectal, and prostate cancer programs.

“The main objective of the program is to provide comfort and quality of life to the patients while they receive treatment.”

“A little bit of attention can go a long way,” said Audrey Quirion. “Patients need to feel comfortable and supported during their treatment. The teamwork between the NLO team and the primary care physicians is essential. The program allows for earlier diagnosis and treatment.”

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