Promoting Diagnostic Excellence Across Medicine
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- American Academy of Dermatology (AAD) - Promoting Diagnostic Excellence: Diversity, Diagnostics, and Dermatology. This project seeks to create opportunities for dermatologists to engage in ongoing education on diagnostics that highlight diverse skin color, which is paramount to equitable care. AAD will create a “Special Edition Question of the Week” activity through which a compelling case is made available each week, giving members a quick and engaging way to earn CME and Continuing Certification Program self-assessment credit. Ten dermatologic conditions will be featured over ten weeks, and three cases for each topic will be included. This case-based, longitudinal self-assessment activity will assess dermatologists’ ability to visually compare and contrast how top dermatologic conditions present in a spectrum of skin color. The activity will be strategically designed to feature skin colors underrepresented in teaching materials and conditions often misdiagnosed in patients of color and to focus on diagnostic safety and quality. All images captured for this activity will also be made available in an online image library for AAD members to use in patient and professional education.

- American College of Chest Physicians (CHEST) - “How We Do It”: CHEST Experts Weigh In. Affecting about 400,000 people in the United States, Interstitial Lung Diseases (ILDs) encompass more than 200 distinct entities and comprise a group of diseases that cause lung inflammation and/or permanent scarring. ILDs are frequently misdiagnosed or overlooked because they present with ubiquitous symptoms common to asthma, COPD, and cardiac disease. A prompt, accurate diagnosis is necessary to start treatment at the early stages of the disease when ILD medications might slow progression. This educational initiative will assist physicians in defining symptoms and patient profiles associated with ILD and recognizing health inequities that may assist in the diagnosis. Multiple asynchronous “How I Do It” activities allow learners to access education conveniently. This initiative includes multiple activities comprising practical reviews of well-defined clinical questions and tools to assist decision-making as needed in practice.
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- **American College of Emergency Physicians (ACEP) - Promoting Diagnostic Excellence Across Medicine in the Older Adult – rAAA Missed Vascular Event.** Diagnosing Ruptured Abdominal Aortic Aneurysm (rAAA) is a time sensitive emergency. When the aneurysm ruptures, the patient experiences intense abdominal or back pain, often leading to an emergency department visit. Once the rupture begins, there is a short window to make the correct diagnosis and surgically repair the aorta. A patient who presents with a possible rAAA is therefore a time-sensitive emergency, and prompt recognition of this rare condition can clearly save lives. The US Preventive Services Task Force recommends screening of all men over the age of 65 who have ever smoked and selectively in women and men who have never smoked. However such screening occurs in only 4-26% of appropriate individuals, with disparity in individuals of color and lower socioeconomic conditions – the very population often treated in emergency department. If detected, a relatively simple surgery corrects the aneurysm and prevents further rupture. However only about 1 in 5 people survive once the aneurysm ruptures, but the earlier the recognition of rupture, the better the odds. The goal of our measure is to rapidly recognize a rAAA, but at the same time provide screening for others. ACEP will develop educational content to promote the translation of evidence-based, early diagnosis of rAAA. The education will target emergency physicians, residents, and physician assistants to improve care for patients through the early detection of rAAA.

- **American Epilepsy Society (AES) - Improving Clinician Competence in Use and Interpretation of EEG: A Matter of Safety, Quality, and Equity.** With this project, AES aims to advance the diagnostic skills of health care providers (HCP) who care for people with epilepsy (PWE). This project strengthens an existing multi-faceted online learning program for HCPs who utilize EEG as a diagnostic tool in the treatment of epilepsy. Improving clinician competence in use and interpretation of EEG is a foundational necessity to increasing diagnostic excellence, improving treatment safety and quality, and reducing co-morbidities. Increasing awareness of potential diagnostic pitfalls and providing standardized training about the appropriate role of EEG and assurance of minimum skills in interpretation helps address underdiagnosis, overdiagnosis, and misdiagnosis. With 3.4 million PWE throughout the world, AES is committed to providing this online course to ensure the overarching message about the importance of acquiring and maintaining excellent EEG skills is accessible to all.

- **American Gastroenterological Association (AGA) - Narrowing Health Disparities in Diagnostic Evaluation of Iron Deficiency Anemia through Clinician-directed and Patient-focused Interventions.** Iron deficiency anemia (IDA) is a common medical condition in the U.S. and an important early, but often overlooked, sign of gastrointestinal malignancy or chronic occult gastrointestinal bleeding. In 2019, the AGA released guidelines on gastrointestinal evaluation of IDA including a diagnostic approach based on patient factors (age, sex, co-existing conditions) that promotes timely and equitable care. Despite these guidelines, many patients do not receive appropriate initial diagnostic evaluation leading to unnecessary hospitalization, morbidity, and mortality. We will address this evidence-to-decision gap by developing 1) a clinician-directed electronic health record-embedded tool and 2) a patient-centered communication tool to facilitate shared-decision making between patients and clinicians. In partnership with the Association for Black Gastroenterologists and Hepatologists (ABGH), we will obtain and incorporate patient feedback into our educational tool. This project aims to standardize care and reduce known health disparities for women and Black populations in IDA evaluation.
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- **American Society for Clinical Pathology (ASCP)** - Promoting Diagnostic Excellence by Improving the Communication of New Cancer Diagnoses. The goal of this project is to develop and disseminate a set of best practices in improving communication protocols/processes for new cancer diagnoses by reducing delayed notifications, missed diagnoses, and related diagnostic errors. Leveraging evidence-based educational design principles, ASCP will use learning collaborative and Implementation science approaches to engage the learners and facilitate small-group discussions and guidance from an expert in QI and laboratory science. Learners will design and implement action learning projects focused on improving communications related to new cancer diagnoses using PDSA framework. By engaging learners from a range of laboratory functions that play a pivotal role in helping the pathologist make and communicate a definitive diagnosis for patients with cancer (e.g., laboratory managers and other laboratory professionals), the project will also help promote recognition of their role in promoting diagnostic excellence along the diagnosis-to-treatment trajectory.

- **American Society of Nephrology (ASN)** - Promoting the Use and Understanding of the new eGFR Clinical Algorithm. ASN will create an implementation toolkit for primary care physicians and specialists that is intended to inform the broader health community of the importance of removal of race from the eGFR calculation. With graphics and a list of frequently asked questions, the toolkit will provide an explanation of what the changes are, why they were made, and what they mean for patients and health professionals. These tools will be easily accessible, downloadable, and printable. ASN will promote these tools to its more than 21,000 members around the world, including approximately 90% of US nephrologists and all nephrology fellows. ASN will use all its communications channels to share the toolkit with its members, the broader kidney community, and other stakeholders, particularly primary care and specialty physicians.

- **American Urological Association* (AUA)** - Promoting Diagnostic Excellence and Health Equity in Urology Care. Prostate cancer is the most commonly diagnosed noncutaneous malignancy among men in the U.S. Typically, primary care providers (PCPs) serve as the initial contact for men who are likely to benefit from prostate cancer screening. However, PCPs may not be aware of the 2023 AUA guideline on early detection of prostate cancer that recommends screening beginning at age 40-45 years for those with an increased risk of developing prostate cancer due to black ancestry, germline mutations, or strong family history of prostate cancer. In this project, AUA will educate urologists on the concept of diagnostic excellence using PSA screening in high-risk populations as an exemplar, develop and disseminate materials designed for primary care settings to promote awareness of prostate cancer risk and AUA’s recommendations for screening, and partner with the Urology Care Foundation to develop patient-physician communication tools to aid in decision-making for prostate cancer screening.

- **College of American Pathologists (CAP)** - Promoting Effective Communication of Pathology Results While Meeting the Various Needs of Patients and Members of the Care Team. Knowledge of cancer biology and treatment options is rapidly evolving, so the need for cancer pathology reports to convey all relevant information in an easy-to-understand format for patients—and the whole care team— is pressing. There is an opportunity to improve diagnostic excellence by redesigning the pathology report to meet the disparate needs of the entire care team, including patients and their caregivers. The challenge of redesigning a pathology report that effectively communicates pathology test results to patients and all members of the care team is significant. We aim to: 1) identify the essential elements of a pathology
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report for each member of the care team, to assist them in timely and accurate diagnosis and treatment; and 2) disseminate best practices through education and engagement. We intend the project to create opportunities for cross-specialty and organizational conversations around improving diagnostic safety and excellence via communication of pathology test results.

- **Society of Critical Care Medicine (SCCM) - Developing a Feedback Mechanism for Receiving ICU Clinician of Patients with Sepsis.** With a grant from CMSS in 2022, SCCM launched an initiative aimed at enhancing diagnostic excellence in the context of sepsis. SCCM developed a four-part series of webcasts and podcasts for multiprofessional clinicians. The four topics were the sepsis Hour-1 Bundle, diagnostic delays and errors, mitigating implicit bias, and engaging hospital leaders, garnering a total of 42,296 views and listens. Additionally, SCCM provided four toolkits, each focusing on essential aspects of sepsis diagnosis. This follow on project will establish an ICU feedback mechanism to support referring clinicians treating patients with sepsis before transfer. SCCM is at the forefront of advancing diagnostic practices in the ICU, ensuring better patient outcomes and empowering clinicians with the highest-quality knowledge and tools.

- **Society for Vascular Surgery (SVS) - Advancing Diagnosis and Staging for Early Detection and Treatment of Peripheral Artery Disease to Prevent Amputation.** PAD is a common disease in the aging population. There are two million people living with limb loss in the United States. Early diagnosing, accurately staging the severity of PAD/chronic limb-threatening ischemia (CLTI) and timely treatment will prevent the need for invasive intervention and reduce morbidity and mortality. The primary goal of this project is to educate and disseminate evidence-based clinical guidance and resources to vascular care teams to optimize the translation to everyday practice, with an emphasis to utilize the application of validated practice tools, Wounds, Ischemia, and foot Infection (WIfI) and Global Limb Anatomic Staging System (GLASS) in diagnosing and staging PAD/CLTI patients. A further aim is to encourage assessment of quality of life of patients in routine clinics. Patient assessment demonstrations using WIfI and GLASS application of WIfI and GLASS in daily practice will help to tailor treatment based on individual patient needs leading to improved patient outcomes.

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