

Case 1: Culture, what culture?

Patient was a 71 yo post-kidney transplant patient admitted to Community Hospital on April 30, 2023 complaints of neck pain and to rule out acute coronary syndrome. His past medical history is significant for CAGB in 2016 and kidney transplant in 2017 and cervical arthritis from a work injury.

In the ER blood cultures were taken due to a low grade fever and mildly elevated white count. On May 1 at 2:50pm, a lab tech with the initials "SP" reported that blood cultures showed gram-positive cocci in pairs in the anaerobic bottle. It was also noted that RN Floor Nurse, was notified and read back the results. At 7:38pm a lab employee with the initials "PB" noted gram-positive cocci in pairs in the aerobic bottle and that the results had been previously reported. The patient was discharged home on May 4, 2023 but the results of the blood cultures were not noted by any of the medical providers, including Dr. Employed Attending and NP Smith. Discharge diagnosis was viral syndrome. Final blood cultures showed *Enterococcus faecalis*. Community Hospital uses an electronic lab and medical record system. Providers are still reached via telephonic pager and cell phone. The hospital has a mix of voluntary/private physicians from the community and some employed hospitalists.

Dr. Private 1 saw the patient on May 11 and continued the patient on statins for carotid stenosis and lipid disorder; pt reported no further fever. At a regularly scheduled visit with Dr. Private 2 on May 15, 2023 the patient reported extreme weakness and creatinine level was 5.38 (normal = 0.7 to 1.4). The patient was sent for immediate hospital admission. Dr. Private 1 and 2 are in the same medical group.

On readmission repeat blood cultures showed gram-positive growth and an ultrasound showed a large vegetation on the aortic valve. Mr. Patient underwent aortic valve replacement on May 17, 2023 and is set for discharge next week with a PICC line for antibiotic administration for 4 weeks. Mr. Patient's updated treatment records reflect that his cardiac condition has remained stable, and his kidney function is normal.

Tasks:

1. Create a fishbone diagram
2. Write 1-2 root cause statements, using the 5 rules of causation
3. Develop 2-3 corrective actions.