



BUILDING AN ILD CARE TEAM: THE STANFORD EXPERIENCE

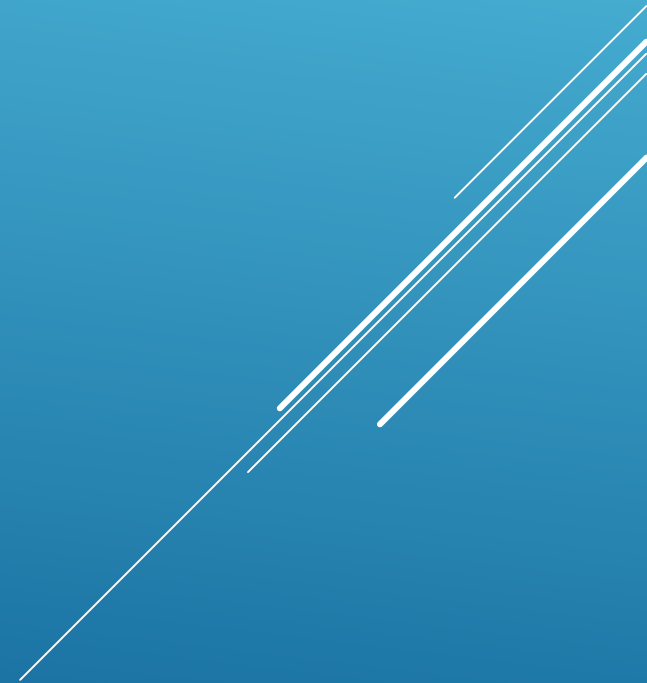
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NURSE COORDINATOR, INTERSTITIAL LUNG DISEASE PROGRAM

STANFORD UNIVERSITY MEDICAL CENTER

NO FINANCIAL DISCLOSURES



1997-
2003

2004-
2007

2008-
2012

2013-
2014

2015-
2016

2018

- Pulm CNS hired for clinical research
- IPF clinical trials start
- Increase in # ILD pts. in Chest Clinic

1997-
2003

- IPF clinical trials
- Increase in ILD clinic pts

2004-
2007

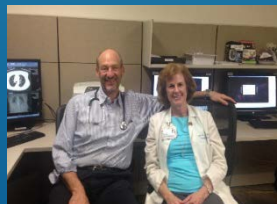
- ILD Clinic created
- ILD Support Group
- ILD Team = 2 (MD and RN)
- PRN ILD "Rounds"

2008-
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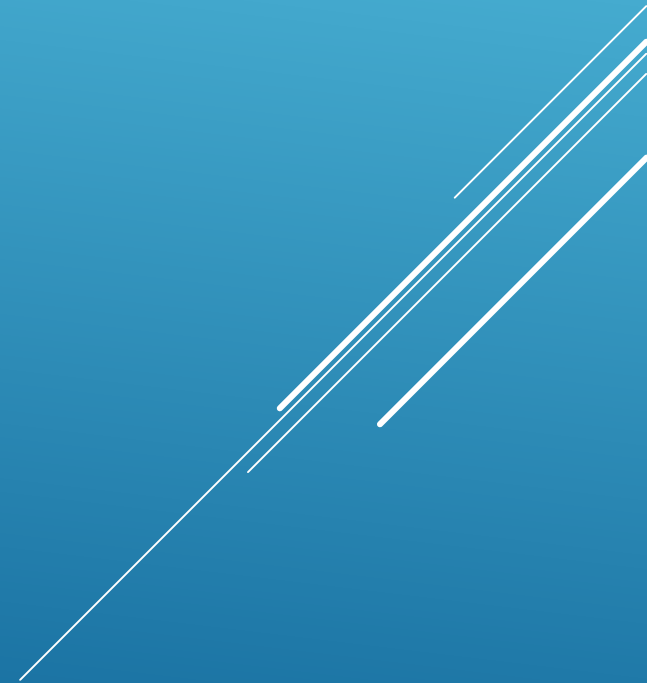
2008-2012

- 2 ILD MDs
- 1 RN CNS/CRC
- 1 ILD clinic RN
- 2 CRCs
- Ongoing Trials
- ILD database
- ILD tissue protocol
- ILD New Pt. Coord
- MDD Rds. continue
- Fresno Outreach Clinic added

2013-2014

2015-2016

2018



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- 1 RN RC
- 1 ILD clinic RN
- ILD database
- ILD tissue database
- ILD New Pt. Coord
- Fresno outreach

2013-
2014

- 3 ILD MDs
- Added NP
- Increased to 3 CRCs
- ILD Rounds bi-monthly
- Monterey outreach clinic added

2015-
2016

2018



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- 1 ILD clinic RN
- ILD database
- ILD tissue database
- ILD New Pt. Coord

2013-
2014

- 3 ILD MDs
- Added NP
- CNS .5 clinic; .5 research
- Increased to 3 RCs
- Started bi-monthly ILD Rds.
- Outreach clinics- Fresno, Monterey

2015-
2016

- PFF Care Center
- Bi wkly MDD rds
- Loss of ILD Med Director 9/14
- 3 ILD MDs
- Loss of NP
- Added Vegas outreach clinic
- 4 CRCs

2018



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2018



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2018



- New ILD Med Director 7/2017
- 3 other ILD MDs
- 1.0 CNS (.5 research mngr, .5 clinic coord)
- 1.5 clinic RN
- 1.5 New Pt. Coords
- .3 ish Social Worker
- Weekly ILD Rds
- Palliative Care- hoping

- ▶ Factors Contributing to ILD MDD Success:
 - ▶ Leadership from the ILD Med Director in collaborating with all involved and running the conference
 - ▶ Collaboration with radiology, pathology, and rheumatology to make a time, location, and day work (challenging)
 - ▶ Communication with rheumatology, radiology, pathology, transplant, PH, IP in pt. co-management
 - ▶ Addition of this conference to the PCCM division-wide calendar of announcements each week
 - ▶ Conference at same time/day, same location + FOOD

ILD MULTIDISCIPLINARY DISCUSSION
ROUNDS: TEAMBUILDING

- ▶ Factors Contributing to ILD MDD Success:
 - ▶ Leadership from the ILD Med Director get 'buy-in' and run the conference
 - ▶ Collaboration with radiology, pathology, and rheumatology to make a time, location, and day work (challenging)
 - ▶ Communication with rheumatology, radiology, pathology, transplant, PH, IP, nursing in pt. mngmt.
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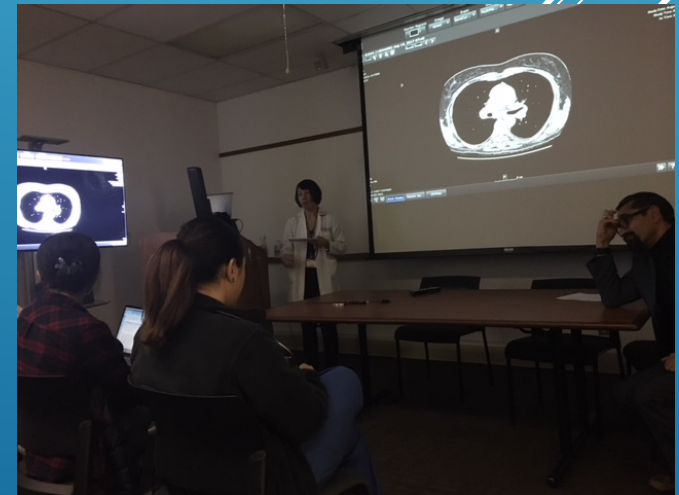
ILD MULTIDISCIPLINARY DISCUSSION ROUNDS: TEAMBUILDING



▶ Factors Contributing to Success (cont'd):

- ▶ List of patients and mtg. reminder sent out the day before; ILD MDs provide names of pts. to include
- ▶ Increased interest by fellows, Tx, other depts. asking if they can present a pt. at rounds (they are placed last on list behind ILD)
- ▶ An EMR (EPIC) template used to document the multi-disciplinary diagnosis and an action plan
- ▶ The ILD program visibility, teaching opportunity, early eval for tx, rec. for biopsy, other consultations, etc...
- ▶ Discussion that creates both controversy and consensus!

ILD MULTIDISCIPLINARY DISCUSSION
ROUNDS: TEAMBUILDING



- ▶ Metrics provided to hospital administration to document growth and programmatic needs:
 - ▶ # of monthly referrals to ILD clinic
 - ▶ # of new ILD clinic pt. visits/month and per year
 - ▶ # of total visits/month and per year
 - ▶ # of ILD pts. referred to Lung Transplant and # actually transplanted
 - ▶ Time from date of referral to actual visit date
 - ▶ # days until next available new patient appointment

METRICS USED TO SUPPORT ILD PROGRAM GROWTH

- ▶ Any ILD team, whether made up of 2 or 20, can connect all patients to essential services, either within or outside of their hospital
- ▶ The ILD Multidisciplinary Discussion can be in many forms; the key is having a treatment plan based on consensus between clinician, radiologist, pathologist
- ▶ ILD program quality and growth requires a multitude of collaborations across clinicians, departments, and institutions to be successful

SUMMARY

