

A LITERATURE REVIEW: ANALYSIS OF CLINICAL PATHWAY IMPLEMENTATION FOR COVID-19 PATIENTS

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ABSTRACT

Clinical pathway is a guideline for evidence-based medical care, best service, patient expectations for communication facilities, multidisciplinary activities, patients, families, as documentation, monitoring, recording, variants, providing the necessary resources and results. Objective to determine the extent to which the implementation of the clinical pathway is applied and is beneficial to Covid-19 patients. Method: The method used was to conduct a critical analysis of research articles, regarding the implementation of clinical pathways for Covid-19 patients during the pandemic taken from the Pub Med and PMC databases with the keywords used: Implementation AND clinical pathway AND Covid-19 AND pandemic. The number of articles analysed was 116 and then obtained 3 relevant articles. Results: Clinical pathway is useful in facilitating the lack of access to patient examination services, supporting examinations, and also treatment. Clinical pathways that are incorporated into E-medical records help clinicians to get the latest information and improve adherence to evidence-based guidelines so as to produce good results for services. Clinical pathways are needed as guidelines in the application of diagnostic and management of Covid-19 disease in children. Conclusion: Clinical pathway implementation is needed in services, especially in access gaps, up-to-date information, clinician compliance, diagnostic guidelines and management of Covid-19 patients to get good evidence-based.

Keywords: clinical pathway; covid-19; implementation

INTRODUCTION

Coronaviruses are viruses that cause disease in humans and animals, causing infections of the respiratory tract, with the mildest symptoms ranging from the common cold to severe respiratory diseases such as SARS (Severe Acute Respiratory Syndrome) and MERS (Middle East Respiratory Syndrome) with a mortality rate of 10% and 37%. Covid-19 is a new disease from the coronavirus family that was first discovered in Wuhan China, in early 2020. Clinical pathway is one of the tools that acts as a quality control, cost control device, including tools to accelerate appropriate treatment. Clinical pathway includes multidisciplinary communication coverage of medical treatment actions, and medical staff from patient admission to hospital discharge. The purpose of implementing a clinical pathway is to improve service quality and cost control as a means of evaluating health services and preventing unnecessary services with measurable evidence-based results for a certain period during hospitalisation.

The use of clinical pathway provides benefits to hospital health services. Clinical pathway has an impact on patient treatment, and the quality of hospital services. Optimal and effective use of clinical pathways has a positive impact on reducing AvLOS rates and saving the average cost of care. Optimisation and effective use of Clinical Pathway is carried out by periodic monitoring and evaluation in its use. Clinical pathway covid-19 is needed as an implication of the emergence of

new diseases (emerging) in handling it requires large costs in treatment, care, and post-treatment and continuous research is needed to perfect its preparation. The challenge in implementing clinical pathways is clinician non-compliance in applying service standards and the dynamics of change make variations occur in the handling of covid-19. The implementation of clinical pathway covid-19 is an effort to minimise the variations that occur in services. The existence of the Covid-19 clinical pathway is expected to standardise medical services, so as to reduce variations in service management. as well as the cost of patient care in the hospital so that the role of clinical pathway as quality and cost control leads to improved patient output and outcomes.

METHOD

Strategi pencarian

Penelitian ini menggunakan metode *literatur review* sebagai dasar untuk mendapatkan jawaban dari Implementasi penerapan *Clinical Pathway* terhadap pasien Covid-19 yang efektif dan efisien dari berbagai faktor yang mendukung sehingga didapat hasil yang optimal dengan berbasis bukti. Semua artikel yang didapatkan terkait dengan analisis implementasi *clinical pathway* pasien covid-19 kemudian dilakukan *PRISMA Protocol Search* untuk menseleksi artikel berdasarkan judul, abstrak, masa pandemi, dan terakhir berdasarkan artikel lengkap untuk kesesuaian objek penelitian.

Pengumpulan Data

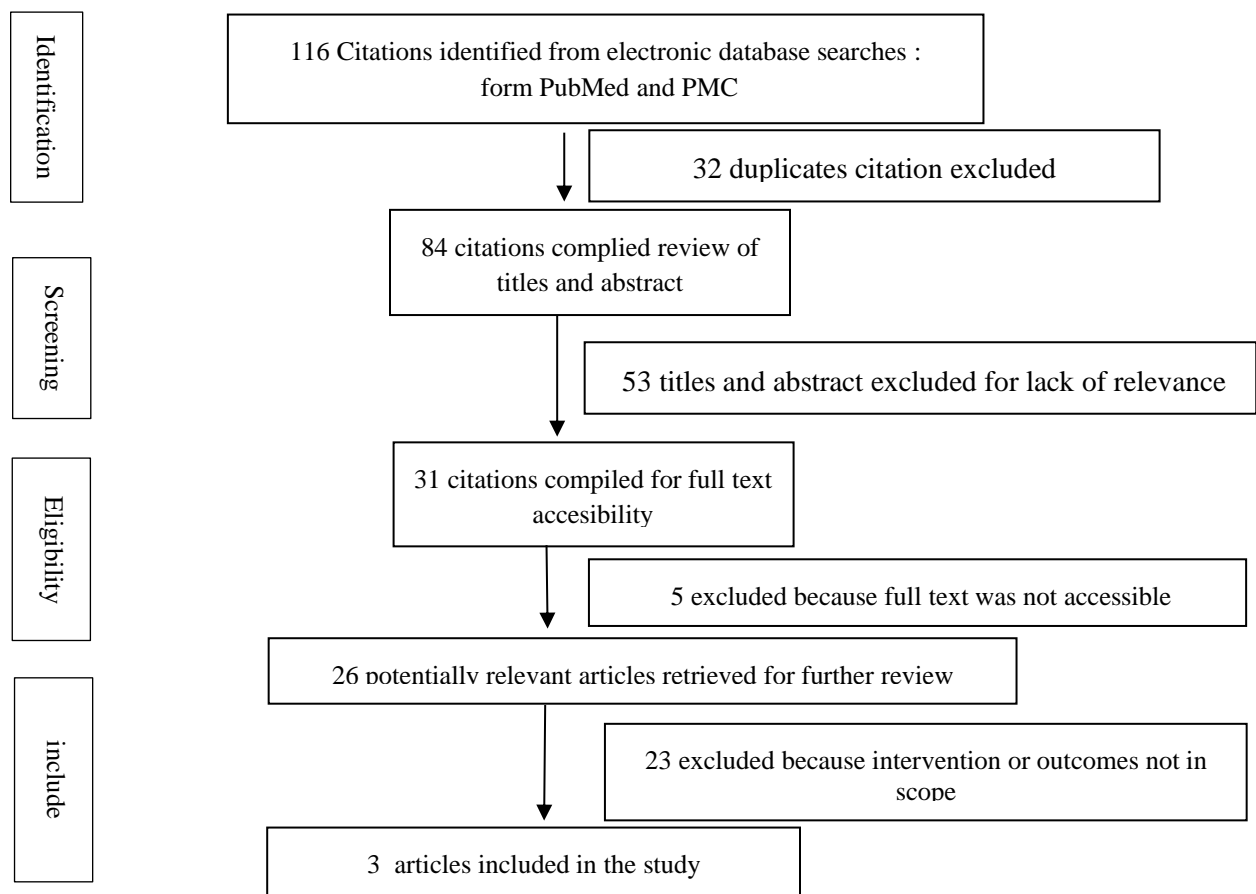


Figure 1. Identification, screening, eligibility, and inclusion of PRISMA's Literature review

RESULT AND DISCUSSION

Table 1.
Characteristic of included studies and interventions description and result

Author	Research Title	Study Design/Data Collection and Measurement	Aim/Study Collection	Result
Ares-Blanco et al. - 2023	Clinical pathway of COVID-19 patients in primary health care in 30 European countries: Eurodata study	Study Design/ Data Collection and Measurement: Descriptive, cross-sectional with data acquired through a semi-structured questionnaire in PHC in 30 European countries, created ad hoc and agreed upon among all researchers who participated in the study. GPs from each country answered the approved questionnaire. Main variable: PHC COVID-19 acute clinical pathway. All variables were collected from each country as of September 2023	Aim: to demonstrate the scope of PHC workflow during the COVID-19 pandemic emphasising similarities and differences of patient's clinical pathways in Europe	COVID-19 clinics in PHC facilities were organised in 8/30. Case detection and testing were performed in PHC in 27/30 countries. RT-PCR and lateral flow tests were performed in PHC in 23/30, free of charge with a medical prescription. Contact tracing was performed mainly by public health authorities. Mandatory isolation ranged from 5 to 14 days. Sick leave certification was given exclusively by GPs in 21/30 countries. Patient hotels or other resources to isolate patients were available in 12/30. Follow-up to monitor the symptoms and/or new complementary tests was made mainly by phone call (27/30). Chest X-ray and phlebotomy were performed in PHC in 18/30 and 23/30 countries, respectively. Oxygen and low-molecular-weight heparin were available in PHC (21/30)
Diamond et al, 2020	A Clinical Pathway for Hospitalized Pediatric Patients With Initial SARS-CoV-2 Infection	Study Design/ Data Collection and Measurement:	Study Aim: To found an urgent need to create a unified, multidisciplinary, evidence-informed set of guidelines for the diagnosis and management of coronavirus disease 2019 in children	In this article, we have noted improvements in care quality and efficiency after implementation of this protocol. In addition to minimizing staff exposure to SARS-CoV-2, we have noted enhanced interdisciplinary communication, improvements in provider satisfaction with

		Retrospective with reviewed the relevant literature on COVID-19 in pediatrics and adults to create guidelines for the diagnosis and management of the hospitalized pediatric patient with confirmed or suspected initial SARS-CoV-2 infection at our institution	consistency and quality of care, and improved provider comfort in caring for patients with this novel disease.
Wendel et al, 2023	Successful Implementation of Workflow-Embedded Clinical Pathways During the COVID 19 Pandemic	Study Aim:clinical pathways have been found effective for improving adherence to evidence based guidelines, thus providing better patient outcomes Study Design/ Data Collection and Measuremen: Descriptive . These guidelines were organized into novel noninterruptive digitally embedded pathways in the electronic health record and made available to nurses and providers at all sites of care. COVID-19 clinical pathways were used 21 099 times. Eighty-one percent of pathway utilization occurred in the emergency department setting, and 92.4% applied embedded testing recommendations. A total of 3474 distinct providers employed these pathways for patient care	Noninterruptive digitally embedded clinical care pathways were broadly utilized during the early part of the COVID-19 pandemic in Colorado and influenced care across many care settings. This clinical guidance was most highly utilized in the emergency department setting. This shows an opportunity to leverage noninterruptive technology at the point of care to guide clinical decision-making and practice

From the results of our review of 3 articles, we found the same results, namely an increase in the use of clinical pathways, as well as an increase in the quality of care and efficiency in care. The effect of using clinical pathways also played a role in minimising exposure to SARS-CoV-2 among staff. Our review has noted improved interdisciplinary communication, increased provider satisfaction with consistency, prevented access disparities in screening, treatment and ancillary services from being eliminated by the use of clinical pathways. Quality of care, and increased provider comfort in caring for patients with this new disease (covid-19).

The initiation of clinical pathways in electronic medical records has been shown to provide clinicians with up-to-date information that can improve adherence to evidence-based guidelines. We therefore share our approach in the hope that others will be able to more efficiently and effectively create evidence-based, institution-specific guidelines and see similar positive outcomes. As new information on SARS-CoV-2 rapidly emerges, it remains important that healthcare providers keep abreast of the current literature, focusing on high-quality studies and reports that best guide evidence-based care.

CONCLUSION

Clinical pathway is a guideline for evidence-based medical care, best service, patient expectations for communication facilities, multidisciplinary activities, patients, families, as documentation, monitoring, recording, variants, providing the necessary resources and results. Clinical pathway covid-19 has many success factors in its implementation. Factors that influence the success of implementing clinical pathway covid-19 include the support of management, staff, and all stake holders in health facilities, as well as regular monitoring and evaluation in its use.

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