

10.15 An audit to assess whether minimum bundle of aetiological tests are ordered in adults with non-CF bronchiectasis.

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Background: Bronchiectasis is a chronic respiratory disease characterised by persistent cough, sputum production and recurrent infections due to abnormal, permanent bronchial dilation. Effective treatment hinges on thorough diagnostics. Careful selection of investigations can significantly alter bronchiectasis management by indicating specific therapies, as well as minimising unnecessary treatments.

Methods: We retrospectively audited adherence to European Respiratory Society (ERS) guidelines for standardised bronchiectasis testing, which recommends a minimal test bundle including Full Blood Count (FBC), serum immunoglobulins, Allergic Bronchopulmonary Aspergillosis (ABPA) testing and sputum culture. We analysed charts of 40 patients with radiologically confirmed bronchiectasis in Peamount Hospital (November 2022 – August 2023).

Results: We observed that 40 (100%) patients had FBC sent, 26 (65%) had serum immunoglobulins sent, 17 (42.5%) were tested for ABPA and 30 (75%) had sputum cultures sent. We observed that just 15 (37.5%) of patients received all four of the suggested investigations, as recommended by the ERS (see Table 1).

Conclusion: Our audit highlights the need for a dedicated screening tool to aid early, accurate diagnosis and enhance bronchiectasis management. We plan to implement the tool and re-audit this topic in one year.

Conflict of Interest: The authors declare that they have no conflict of interest.

Table 1: Investigation Distribution in Bronchiectasis Cohort

INVESTIGATION	FBC	SERUM IMMUNOGLOBULINS	ABPA TESTING	SPUTUM MC&S	ALL RECOMMENDED INVESTIGATIONS
NUMBER OF PATIENTS	40/40 (100%)	26/40 (65%)	17/40 (42.5%)	30/40 (75%)	15/40 (37.5%)