The University of California San Francisco (UCSF) Mission Bay’s (MB) Adult Infusion Center (AIC) is addressing the growth and complexity of cancer and cancer care by opening the Precision Cancer Medicine Building (PCMB) last June 2019. It added 47 more infusion bays to its existing AIC in the Gateway Medical Building (GMB).

The delivery of chemotherapy to cancer patients is a complex multifaceted process involving concerted efforts by multiple departments including the Clinical Laboratory (ClinLab). The ClinLab plays an essential part in providing timely, high-quality service. As a result, it can also lengthen wait times and therefore contribute to considerable stress for patients and families attending outpatient clinics. Our EBP initiative using the theoretical framework of the Theory of Constraints exploiting constraints and simplifying the process reduced CBCD TAT. With the decreased in laboratory CBCD TAT results, we anticipate:

- Decreased patient wait times, thereby improving patient satisfaction;
- Patient inflow and outflow is improved;
- Increase utilization of infusion bays, adding more infusion appointments per weekday, projecting an additional income of more than $1.5 million annually. This calculation uses the chemotherapy, IV infusion price of $1,321.00 ("Pricing transparency," n.d.) with ten additional patients per weekday.

Limitations:
- Study settings and hematology analyzers may be unique to UCSF MB AIC and ClinLab.
- Additional tests, such as Chemistry test, also influence the laboratory CBCD TAT results, we anticipate.

Future Directions:
- Incorporating the Total Laboratory Automation System (TLAS) may further decreased the Col-Rec and Rec-Test TAT of CBCD testing.
- Improved panic value calling workflow may impact the Test-Rec TAT
- The Pediatric Infusion Center (PIC) in UCSF MB may benefit from this EBP.

References