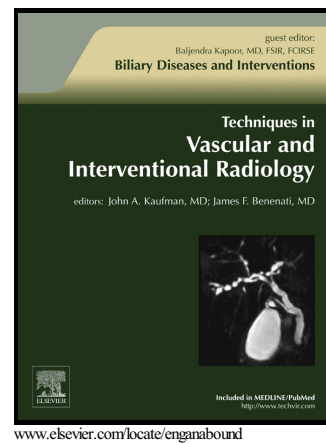


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# The role of the PERT: how to build one, who to include, scenarios, organization, and algorithms

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## Abstract:

Pulmonary Embolism Response Teams (PERTs) are multidisciplinary response teams aimed at delivering a range of diagnostic and therapeutic modalities to patients with pulmonary embolism. These teams have gained traction on a national scale. However, despite sharing a common goal, individual PERT programs are quite individualized—varying in their methods of operation, team structures and practice patterns. The tendency of such response teams is to become intensely structured, algorithmic and inflexible. However, in their current form, PERT programs are quite the opposite. They are being creatively customized to meet the needs of the individual institution based on available resources, skills, personnel and institutional goals. After a review of the essential core elements needed to create and operate a PERT team in any form, this chapter will discuss the more flexible feature development of the nascent PERT team. These include team planning, member composition, operational structure, benchmarking, market analysis and rudimentary financial operations.

## Introduction:

Pulmonary Embolism Response Teams (PERTs) represent a novel organizational, strategic response to the management of pulmonary embolism. While a multi-disciplinary, acutely available, team concept has been implemented for other complex disease states in the form of trauma teams, stroke teams and teams treating acute coronary syndromes, the PERT concept represents a unique variation on this theme. Indeed, stroke, trauma and acute coronary syndrome teams emphasize the rapid delivery of guideline based therapies, however PERT attempt to introduce structure while treating a disease while faced with many clinical unknowns. Thus, whether or not PERT is good for patients and / or cost-effective is still not known. Nonetheless, the following paragraphs will offer an in-depth overview of forming a PERT under the assumption that the PERT movement drives strategic and organizational efforts to optimize PE care in the form of 1. Disease awareness optimization, 2. Quality enhancement, 3. Clinical benchmark creation, 4. Efficiency and Cost-containment, and 5. Research development.

## PERT Team Composition:

**Care Providers:** Since first implemented in Massachusetts General Hospital in 2011, PERTs have become a national phenomenon with over 100 teams estimated to be at some stage of formation in the United States. Nonetheless, despite PERT prevalence, there is

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