The Surgical Care Improvement Project (SCIP) is an organization focused on improving surgical care by significantly reducing surgical complications. One of the measures for the SCIP project is the cardiac measure; surgery patients on a beta-blocker prior to arrival receive a beta blocker during the perioperative period. At our institution, our baseline compliance with this measure was 87%. A streamlined process was needed to increase compliance to 100% as a monthly goal.

An interdisciplinary team was assembled, consisting of members from anesthesiology, pharmacy and perianesthesia nursing. A standing order by protocol was developed to create a process for preoperative nurses in the Surgery & Procedure Unit and Prep & Holding area to assess patients’ current beta blocker medications. If a patient has not taken the beta blocker within the specified time period, the nurse further assesses for contraindications and if none are found, a standard dose of a beta blocker is administered.

Education for the protocol commenced in January 2009 with implementation in February 2009. Compliance during the last year was an average on 96.8% and continues to be monitored monthly. The protocol has been revised based on feedback from the nursing staff.

The development of this protocol has advanced the practice of perianesthesia nurses by providing them more autonomy in assessing patients’ home medications. It has reduced the number of phone calls made to the anesthesia department and has achieved improved compliance with perioperative beta blocker therapy.