In fiscal year 2011, the PostAnesthesia Care Unit (PACU) maintained a 91-minute average Phase 1 length of stay (LOS) for combined inpatient and outpatient populations. This LOS resulted in OR delays, increased charges to the patient and increased nursing care hours. A team of PACU staff nurses, managers, and anesthesia providers collaborated and developed an innovative approach to outline safe, efficient PACU care and discharge criteria coined the “PACU Passport”.

The overall objective of this initiative is as follows:
The team will improve Phase 1 PACU Average LOS from 91 minutes to 60 minutes by October 30, 2012, generating an estimated cost savings of $199,485.00 and potential reduction in cost to the patient of $760,500.00 annually.

Utilizing ASPAN standards and other evidenced-based resources, the team developed a PACU Passport for both RN and Patient Care Assistant staff. These passports outline care priorities and time targets for each portion of patient care, as well as, Phase 1 discharge criteria. Mandatory education was completed and staff was given passport pocket cards.

PACU LOS dashboards were developed, including overall PACU LOS data and individual nurse LOS results. Additionally, patient outcome data was monitored. Overall results reflected that with an average monthly volume of 1054 PACU cases/month, the average PACU LOS was reduced to 66 minutes by August 31, 2012, approaching the October 2012 target. Outcome data demonstrated only one phase 1 readmission. Ultimately, by implementing a PACU Passport organizations may improve perioperative patient flow and reduce overall healthcare costs.