A rapid improvement event (RIE) targeted to improve turnover times in the operating rooms directly impacted the practice of PACU nurses. The RIE showed inefficiencies and redundancies among team members and throughout the surgical process. Patients were connected and disconnected to blood pressure cuffs three different times during the perioperative experience. Multiple reports were given to PACU nurses from the OR nurse and anesthesia.

The objectives of the project were to decrease OR turnover times, find and maximize efficiencies throughout the surgical patient’s journey and eliminate redundancies in process and improve staff satisfaction. Several experiments were implemented after reviewing the process and identifying areas to improve. Vital sign equipment was standardized and adaptors acquired so the blood pressure cuff could be placed once and remain in place for entire perioperative experience. Standard work was developed for team members that defined roles and reduced redundancies increasing efficiencies during patient hand offs.

The handoff between the OR and PACU nurse was eliminated and anesthesia reported all pertinent information in their hand off. This enabled the PACU nurse to expedite pain management and assessment of post surgical needs 5-7 minutes sooner. Having the blood pressure cuff already in place saved 1-2 minutes leading to faster assessment of vital signs and increased quality of patient care management and increased staff satisfaction.