IMPROVING PATIENT OUTCOMES BY IMPROVING POST-SURGICAL ANTIBIOTIC TIMELINESS

Team Leaders: Peter Stoffan RN BSN, Alexandra Schuyler Alsop RN MSN
New York-Presbyterian Hospital/Weill Cornell Medical Center, New York, New York

Background Information: Medications that are given in the operating rooms do not communicate with the electronic medical record (EMR) therefore, the PACU RN is responsible for scheduling the post-operative medications based on OR medication administration timing. Previous practice of the PACU RN was to utilize a paper handoff SBAR sheet to document antibiotic timing. Strictly utilizing a paper handoff sheet allows for gaps in communication and ineffective RN to RN handoff in the perianesthesia setting. Out of the sampled patients who had their post-operative antibiotic scheduled on the EMR, 70% received their first post-operative antibiotic dose on time. Out of the sampled patients who did not have their post-operative antibiotic scheduled on the EMR, only 31% received their first post-operative antibiotic dose on time. Data shows a direct relationship between having the antibiotic scheduled on the EMR and patients receiving the antibiotic on time. Currently a total of only 48% of post-operative patients receive their antibiotics on time.

Objectives of Project: By educating PACU Nurses about antibiotic scheduling on the EMR, the objective of this project is to improve the timeliness of post-surgical antibiotics by 15%.

Process of Implementation: Educating the PACU RN to schedule the post-operative antibiotics on the EMR will ensure a high-quality and reliable RN to RN handoff to improve consistency of timeliness of antibiotic administration.

Statement of Successful Practice: Three months after education and implementation, the percentage of patients who have their antibiotics scheduled on the EMR improved from 44% to 66% and the percentage of patients who have received their antibiotics on time improved from 48% to 64%.

Implications for Advancing the Practice of Perianesthesia Nursing: The significant improvement in consistency of timeliness of post-surgical antibiotics supports other evidenced-based practice studies that utilizing the EMR can improve reliability and improve patient outcomes in the perianesthesia setting.