

**MEETING THEM AT THE DOOR: ENSURING A SAFE SURGICAL EXPERIENCE FOR THE COMPLEX PEDIATRIC PATIENT BY DESIGNING AND IMPLEMENTING THE ROLE OF THE PRE-OP CLINIC RESOURCE NURSE**

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**BACKGROUND INFORMATION:**

Our complex pediatric patients frequently arrive for surgery with an extensive list of comorbidities. The Anesthesia group for our facility has developed a list of patient conditions ("anesthesia alerts") for which additional information/orders are required (such as medication weans, anticoagulant adjustments, seizure disorders, ketogenic diet management and apnea evaluation ) pre-operatively to assure patient safety and coordinate therapies. Historically this list of anesthesia alerts was completed by a clinic nurse. Unfortunately, there were many gaps in the data collection and the incomplete alerts were frequently passed on to the pre-op nurses for follow up, often necessitating additional phone calls to families and potentially delaying crucial interventions.

**OBJECTIVES OF PROJECT:**

Our objective in the design and development of the Pre-Op Clinic Resource Nurse role was to efficiently address all anesthesia alerts, ensuring timely interventions pre-operatively and assuring patient safety, ultimately improving patient satisfaction.

**PROCESS OF IMPLEMENTATION:**

An eight week pilot program was conducted, placing a pre-op nurse in the clinic to complete anesthesia alerts for all patients for whom surgery orders were completed. The pre-op nurse also had the opportunity to complete pre-op teaching during this visit and begin the process of care coordination.

**STATEMENT OF SUCCESSFUL PRACTICE:**

Upon completion of our pilot, multiple safety improvements were noted. No surgical orders arrived in the pre-op office with incomplete anesthesia alerts, compared to a 20% return prior to the pilot. Medication weans and lab orders were addressed with providers in person while reviewing the medical history. Patients with cardiac issues, MDROs, difficult airways, s/p organ transplantation, risk of malignant hyperthermia and hematological concerns were further evaluated, past medical records obtained and plans put in place for a safe surgical experience. Physicians and clinic nurses responded positively to the new role in terms of patient safety, patient satisfaction and workflow efficiency.

**IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:**

Evaluation post the pilot program was overwhelmingly positive and the recommendation was made to create a permanent Pre-op Clinic Resource Nurse Position. This role is now a full time position ensuring the streamlined, efficient, safe preparation of our patients for surgery.