

## **IMPLEMENTATION OF AN AMBULATORY PACU LENGTH OF STAY PROJECT**

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**Background:** A review of Ambulatory Surgery Length of Stay (LOS) data indicated only 10-15% of patients were discharged within 2 hours of PACU admission. The financial implications of ineffective throughput, coupled with patient satisfaction scores related to pain control provided an opportunity to redefine the Ambulatory PACU process. A multidisciplinary team with representatives from nursing, anesthesia and surgery was formed to develop surgery specific pathways to standardize care delivered to ambulatory patients with the goal of 80% of patients being discharged within 2 hours of PACU admission, without compromising quality of care or patient satisfaction.

### **Objectives of the Project:**

- Develop Anesthesia and Surgery specific Pathways to improve PACU patient process, with an emphasis on preemptive pain management and the use of regional anesthesia
- Develop Nursing Pathway to efficiently move patients through Phase 1 and Phase 2 without compromising patient safety or satisfaction
- Maximize utilization of resources

### **Process of Implementation:**

- Literature search to review best practices for processing patients through an ambulatory PACU, including the use of regional anesthesia, preemptive analgesia, and postop voiding protocols
- Swim lane process map of nursing practices demonstrated opportunities for improvement to efficiently recover and prepare patients for discharge from the Phase 2 PACU
- Guidelines/Pathways developed for division specific surgeries, including GYN, Orthopedics, Plastics & Breast, Urology and General Surgery
- Pathways include standardization of care in Preoperative Holding Area, OR and PACU
- Nursing Pathway defines care within appropriate time frames
- Ongoing staff education of new pathways
- Implementation of “Clinically Ready to Go” and actual “Discharge” times, with delay codes
- Audit of surgery specific pathways allows for feedback to surgery & anesthesia providers

**Statement of Successful Practice:** Implementation of surgery specific pathways has led to a 60% PACU discharge time within 2 hours, without compromising quality of care or patient satisfaction. Increasing regional and preemptive analgesia has also led to decreased use of postoperative opioid use and improved pain scores.

**Implications for Advancing the Practice of Perianesthesia Nursing:** Perianesthesia nurses working with a multidisciplinary group have improved the care delivered to their patients while recognizing the need to maintain fiscal responsibility to the institution.