

**Enhanced Recovery After Surgery at Howard County General Hospital:  
A Multidisciplinary and Collaborative Initiative**

Team Leaders: Hadley Wesson MD MPH, Mary Christina Joy Lazo MSN RN CPAN  
Howard County General Hospital, Columbia, Maryland

Team Members: Yee-Wen Shyu BSN RN, Cindy You BSN RN, Ellen Yutuc BSN RN

**Background Information:** In the traditional model, patient care in the hospital is delivered in silos by different providers which hinders the delivery of optimal patient care. Enhanced Recovery after Surgery (ERAS) pathway is a new standardized, multidisciplinary, and collaborative quality initiative that is evidence-based associated with better outcomes to surgical patients.

With the continuous challenge posed by reimbursements, Howard County General Hospital (HCGH) needs to implement efficient and cost effective initiative that improves patient care and patient experience to support the Johns Hopkins Innovation 2023 strategic plan –“ Improve the quality and affordability of healthcare”; hence the birth of ERAS at HCGH.

**Objectives of Project:** Implement a standardized, patient centered protocol at HCGH to facilitate optimal recovery of patients undergoing surgery or procedure which integrates the pre-operative, intra- operative, post-operative, and post-discharge phases of care to reduce hospital length of stay (LOS); improves patient care and outcomes; and improve patient/family experience and satisfaction by getting the patient back to normal preoperative function faster.

**Process of Implementation:** On January 2016, a multidisciplinary ERAS Committee was developed and tasked to create ERAS pre-op order set and protocol; ERAS resource booklet for patients; get the buy-in; disseminate information; and educate the different stakeholders. On April 2016, ERAS was implemented on colorectal, followed by GYN and Orthopedic cases. On February 2019, ERAS was expanded to all surgical patients to support “ERAS for ALL.” The NPO Guidelines and the Posting Sheet were also revised to reflect carbohydrate loading 2 hours before surgery.

**Statement of Successful Practice:** The success of the initiative is dependent upon highly committed and collaborative multidisciplinary teams. HCGH colorectal data from NSQIP has shown 1.3 days reduction in LOS and 1 day earlier transition into oral pain medication from January 2015 to February 2017 due to more tolerable post-operative pain.

**Implications for Advancing the Practice of Perianesthesia Nursing:** ERAS at HCGH strongly promotes multidisciplinary collaboration and the use of evidence-based and best practices to deliver optimal care to patients. Education of providers and patients; monitoring of protocol compliance, including barriers; and the collection of outcomes data are imperative to the initiative’s success. Improved outcomes, decreased LOS, and improved patient/family satisfaction have strongly encouraged perianesthesia nurses’ commitment and participation.