Nurses and Pharmacists Collaborate to Improve Patient Care in the Post Anesthesia Care Unit (PACU) – Leanne LeClair, RN, BSN, CPAN and Emmeline Igboekwe, PharmD, MS

Our hospital, a 409-bed acute care facility, performs approximately 35,000 surgical cases per year. Before 2008, the central pharmacy provided services to the PACU. Many issues led to nursing dissatisfaction with pharmacy services: prolonged medication delivery time of drugs not stocked in PYXIS, patient care interruptions for order clarification, and incorrect delivery locations for medications.

Nursing conducted a four-month study, determining that the average delivery time for STAT drugs was 48 minutes. The chairperson of the PACU Practice Council met with pharmacy management to discuss service improvement strategies. In response, a pharmacist workstation was incorporated into the PACU.

A pharmacist now works in PACU five days per week. The pharmacist processes post-operative orders, expedites medication delivery, verifies orders, and provides medication reconciliation. A follow-up study showed an average time of stat drug delivery of 18.9 minutes. A nursing survey indicated greatly improved satisfaction in timelines of drug delivery, ease of order clarification, and overall rating of pharmacy services.

Physical proximity of the pharmacist to nurses and patients in PACU is a relatively new concept in decentralized pharmacy services with demonstrable positive outcomes. This process change, inspired by staff nurses, exemplifies the benefits of collaboration between disciplines to enact process improvement.