MY PATIENT, MY CHART!
Team Leader: Maria Gutierrez BSN RN CPAN
MemorialCare Saddleback Medical Center Laguna Hills, California
Team Members: Patty Mendoza BS RN CAPA, Amor Eluna BSN RN CCRN CPAN,
Shannon Biehn BSN RN CAPA

Background Information: Prior to implementation, the Charge Registered Nurse (RN) reviewed all Pre-Operative charts on day of surgery, and ensured the necessary elements were present prior to the patient going to surgery. The Charge RN was responsible for reviewing all lab work, diagnostic testing, and confirmed the presence of documented clearances (Cardiac, Pulmonary, etc.) if indicated. The Charge RN would communicate any abnormalities to the Surgeon and Anesthesiologist. The Pre-Operative Admitting RN would perform patient care and enter data into the Electronic Medical Record. A disconnect existed between the Pre-Operative Admitting RN and the overall clinical picture of the surgical patient.

Objectives of Project:
- Promote patient safety
- Elevate our nursing practice by having the Pre-Op Nurse own accountability for chart review and patient care.
- Enhance continuity of care
- Educate Pre-Operative Registered Nurses regarding necessary elements of chart readiness.

Process of Implementation: Pre-Operative RN’s received training and education in the Pre-Admission Testing Unit and the Pre-Op Unit regarding the necessary requirements for chart completeness. Legal issues, as well as Anesthesia Lab Guidelines for Pre-Operative Testing were introduced through a systematic chart review technique with each of our Registered Nurses. We have incorporated this new training in our unit based orientation for all new hires to the Pre-Operative area. Our newly trained nurses are learning to anticipate patient needs and requirements for surgery.

Statement of Successful Practice: We have found since implementing this new process, that we have enhanced the continuity of care of our patients. By empowering the Pre-Operative Admitting RN with the comprehensive clinical picture of the surgical patient’s state of health, we are promoting a safe environment of care for surgical patients. The charge RN is now able to triage any potential issues that may impede patient safety and patient flow. This has actually helped contribute to the overall efficiency of OR Turnover Times.

Implications for Advancing the Practice of Perianesthesia Nursing: Implementing this change has elevated our nursing practice by promoting autonomy and problem solving skills for our Pre-Operative RN’s. We have empowered them to be competent coordinators of patient care. It provides an environment of patient safety, enhances direct communication between admitting RN and Anesthesia, and utilizes the Charge RN in a more functional role.