Introduction: Obstructive sleep apnea (OSA) is a life-threatening concern in the ambulatory surgical setting. Sleep that is thwarted after receiving anesthesia, sedating medications, alcohol consumption, or pre-existing comorbidities together they remain a potential concern for patient safety and airway patency.

Identification of the problem: Perianesthesia nurses noted prolonged post anesthesia recovery, lower oxygen saturation levels and delayed discharge times in an ambulatory surgical center. A nurse-initiative protocol was established following a literature review.

Purpose of the Study: The purpose of this study was to identify OSA candidates prior to surgery using perianesthesia nurse-driven guidelines, integrating a validated OSA screening tool during pre-operative phone interviews, promoting patient education and supporting safer nursing practices.

Methodology: This was an IRB approved, nurse-driven study. A reliable STOP-Bang Questionnaire was implemented to recognize patients at risk for OSA prior to surgery. A standardized protocol was established, including OSA discharge teaching, interventions, and adoption into the electronic medical records.

Results: Prior to this study, a patient sleep assessment was not consistently evaluated. The STOP-Bang Questionnaire was complete in 1,118 ambulatory surgical patients. The outcomes concluded 116 (10%) of ambulatory patients scheduled for elective surgery had risks for undiagnosed OSA screening, leading to 179 (16%) cancellations of scheduled surgeries. Following nurse-drive OSA protocol, no adverse hospital admissions since resulted.

Discussion: Pre-operative screening for OSA has fostered improved patient outcomes by avoiding recovery delays and discharge times. Through the support of OSA guidelines perianesthesia nurses have enhanced interprofessional communications, developed patient education, reduced hospital admissions and advanced patient safety in an ambulatory setting.

Conclusion: Minimizing adverse health-related problems following ambulatory surgery remains a priority for perianesthesia nurses. Screening patients sleep habits and their OSA risks using a STOP-Bang Questionnaire prior to surgeries or procedural sedation improved patient safety and upholds best perianesthesia nursing practices.

Implications for perianesthesia nurses and future research: Future research recommendations include, intensifying data retrieval to include a facility-wide OSA screening assessment, expand sample size and length of study.