PREOPERATIVE SIGNS TO ENSURE PATIENT SAFETY AND JCAHO COMPLIANCE

Team Leader: Katrina Push, RN

Veterans Administration Healthcare System, Ann Arbor, Michigan Team Members: Luz Evon, RN, BSN, Claudia McCormick-Male, RN, BSN, Marilyn Gardner, RN,

Diane Bowling, RN, Diana Brunner, RN, BSN

BACKGROUND INFORMATION:

Patient safety, as well as JCAHO compliance has always been a concern in our preoperative area. Our unit sometimes found it difficult to make sure all paperwork was processed correctly without making multiple trips back and forth to the nursing station to check on the computer. Keeping track of the Attending staff as well as Anesthesia also proved to be very time consuming.

OBJECTIVES OF PROJECT:

As preoperative requirements increased we felt we needed a check system to ensure we were completing these in a timely manner without sacrificing patient care.

PROCESS OF IMPLEMENTATION:

The nursing staff in the preoperative unit developed a "checklist" of what was required prior to each patient entering the operating room. Once the checklist was designed – the requirements were turned into signs that could be placed on patient bed in the preoperative area. As patients arrived in the preoperative area – their chart was checked and the appropriate signs were hung. As each item was completed – the sign was removed from bedside and a final paperwork check was completed once all signs were removed.

STATEMENT OF SUCCESSFUL PRACTICE:

The checklist, along with the corresponding signs has been very successful in our unit. It has saved the nurses time as well as the surgical staff. They are able to see their patient and know what items are still needed to move them into the operating room. We have had multiple patients comment on the signs stating it increases their comfort level knowing we have a check system.

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

Since implementation of the preoperative checklist and signs our unit has run very smoothly. We do not have an issue with missed paperwork/lack of consent or sites marked. Staff who do not work preop on a daily basis have found this system to be easy to work with. We are a teaching hospital and as residents rotate they let us know how helpful this system has been to them.