

IMPLEMENTING A TRIGGER PROGRAM IN THE POST ANESTHESIA CARE UNIT

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BACKGROUND:

BIDMC adopted a Trigger program to allow for early detection and intervention for patients who needed increased level of care. A standardized guideline to escalate care concerns was not available in the PACU. A multidisciplinary team with representatives from Nursing, Anesthesia and Surgery developed a framework for PACU staff to follow when a patient unexpectedly decompensates, requires a higher level of care or does not follow normal post op recovery.

OBJECTIVE OF THE PROJECT:

- To define early warning signs of patient decompensation
- To define early intervention guidelines to prevent poor patient outcomes and code situations
- To maximize resources for positive patient outcomes

PROCESS OF IMPLEMENTATION:

- Literature search to define best practices in other institutions
- Defined criteria that may lead to patient decompensation
- Developed a guidelines for implementation of the criteria and the steps to follow
- Developed a system of communication from nursing to Attending Surgeons and Attending Anesthesiologists
- Developed closed loop communication of expected patient outcomes and next steps if outcomes not met
- Created an ongoing educational roll out of the Triggers Program
- Created a Triggers electronic record in CPOE with a standardized form to be printed in chart.
- Implemented an ongoing audit of Triggers and their outcomes
- Analyzed PACU Triggers and criteria and make changes as needed for safer patient outcomes

STATEMENT OF SUCCESSFUL PRACTICE:

The implementation of the Triggers program has led to an increase in positive patient outcomes, by providing guidelines and early communication to all involved team members.

IMPLEMENTATION FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

PeriAnesthesia nurses, working in collaboration with a multidisciplinary group of licensed practitioners, can impact positive patient outcomes with predictability in workflow and early identification and treatment of adverse events.