

BEING BROKE IS NO JOKE. TIME = MONEY

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Background Information: HVI patients can experience delays in their surgical cases. Members of the anesthesia team had time in between cases to start peripheral IV's, arterial lines, and epidurals on patients that were waiting in pre-op. It was not feasible for the anesthesia team to physically go to pre-op to begin prepping the patient for surgery. Due to the placing lines and epidurals in the OR, patient delays were on the rise. The idea of a Prep & Hold area was born.

Objectives of Project: The purpose of the Prep & Hold area was to increase the efficiency of the OR and expedite surgery. Patients were already experiencing delays in their surgeries and waiting to be prepped was just an additional time constraint. When the new J building was being constructed, the question was asked would a Prep & Hold area be beneficial to the pre-op staff and the OR? Could we have a sterile area to perform arterial lines, and epidurals, IV's? Would patients express satisfaction in regards to having their pre-surgical needs met in an area in close proximity to the OR?

Process of Implementation: The multidisciplinary teams involved with cardiac surgery met and decided to have a Prep & Hold area for inpatients as well as for patients who came in the day of surgery. The Cardiac Pre-op nurses had to learn new hands on competencies in regards to PCA and arterial line monitoring.

Statement of Successful Practice: Turnover times in the OR were decreased. One hour of OR time is equivalent to \$1000. Prep & Hold while designed to expedite surgeries and decrease wait times for our patients, also contributed to a major cost savings for HVI. All these factors have contributed to overall patient and employee satisfaction.

Implications for Advancing the Practice of Perianesthesia Nursing: The Prep & Hold area created learning and educational opportunities for the Cardiac Pre-op nurses. They expanded their knowledge by learning the various peripheral nerve blocks, such as, interscalene, supraclavicular, axillary, and femoral nerve blocks. The nurses had to expand their skills and practice sets.