



# Preparing Your Inpatient for Surgery

Dawn Miller BSN RN, Angel Ryan RN

Virtua Voorhees, OR Holding



## Introduction

Unprepared patients are a significant cause for delays in the operating room (OR) which can be quite costly (Van Winkle, Champagne, Gilman-Mays, & Aucoin, 2016). A need was identified to better prepare patients for their procedures and surgery. Over the past year the Virtua Voorhees OR Holding Area has been collecting data on patients that arrive to the unit unprepared for their surgery. Patients that arrive unprepared result in delays for the OR which can impact the schedule for the entire day. In addition, delays increase stress for the surgical patient and cause potential patient safety concerns. Delays affect not only patients, but also tie up valuable nursing time on the floor, in the Holding Area, and in the OR.

In the past, the Voorhees OR Holding Area has developed educational tools for nurses on how to prepare their patients for surgery or procedures. Some improvement was noted regarding patient preparedness, but was not sustained. Research has shown the benefits of preoperative education for surgical patients (Kruzik, 2009). We hypothesized that educating patients on the reasoning behind the OR preparations would encourage them to become more involved with their own care and result in better prepared patients. A literature search related to educating patients on surgical preparation resulted in very little evidence.

The objective of this study was to evaluate whether educating patients and involving them in their own preparation decreased the number of patients arriving unprepared. We hypothesized that by educating patients on the rationale for removing items such as dentures, jewelry, contact lenses and clothing, there would be an increase in patient compliance with these safety concerns which would lead to a decrease in delays.

## Methods

- ❖ A literature search was conducted which yielded little evidence related to educating patients about surgical preparation. A patient education handout was developed with the goal of involving patients in their own care and preparation for surgery. Included on the handout were explanations for NPO status and removal of jewelry, contact lenses, dentures and clothing.
- ❖ The tool was presented at the Virtua Voorhees Advanced Nurse Clinician (ANC) Council meeting and approval was obtained from three ANCs from Medical/Surgical units to trial the education tool.
- ❖ In-servicing was provided for the clinical staff on these 3 units. Nurses were instructed to distribute the educational tool to every patient having surgery or a procedure and then to follow up to see if the patient had any further questions.
- ❖ Patients were asked on admission to the OR Holding unit if they had received the handout. Data was collected regarding whether or not the educational tool was given to the patient and if the patient arrived prepared for the OR.
- ❖ Data was collected on an internal form. Nurse and patient compliance and results were reported to the Surgical Services ANC who then presented these results to the ANCs of the these floors.
- ❖ Preliminary results were obtained after 2 months.

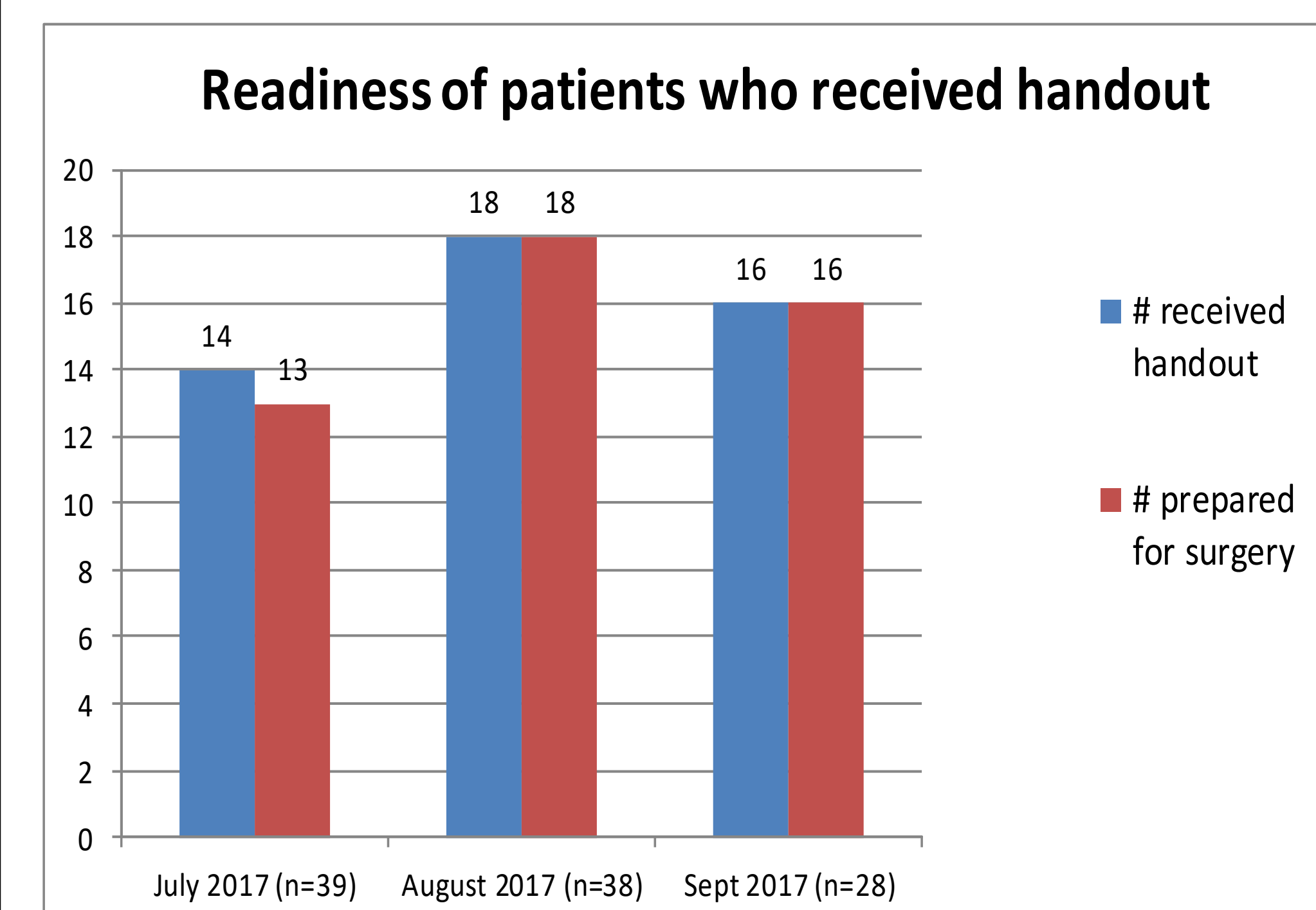
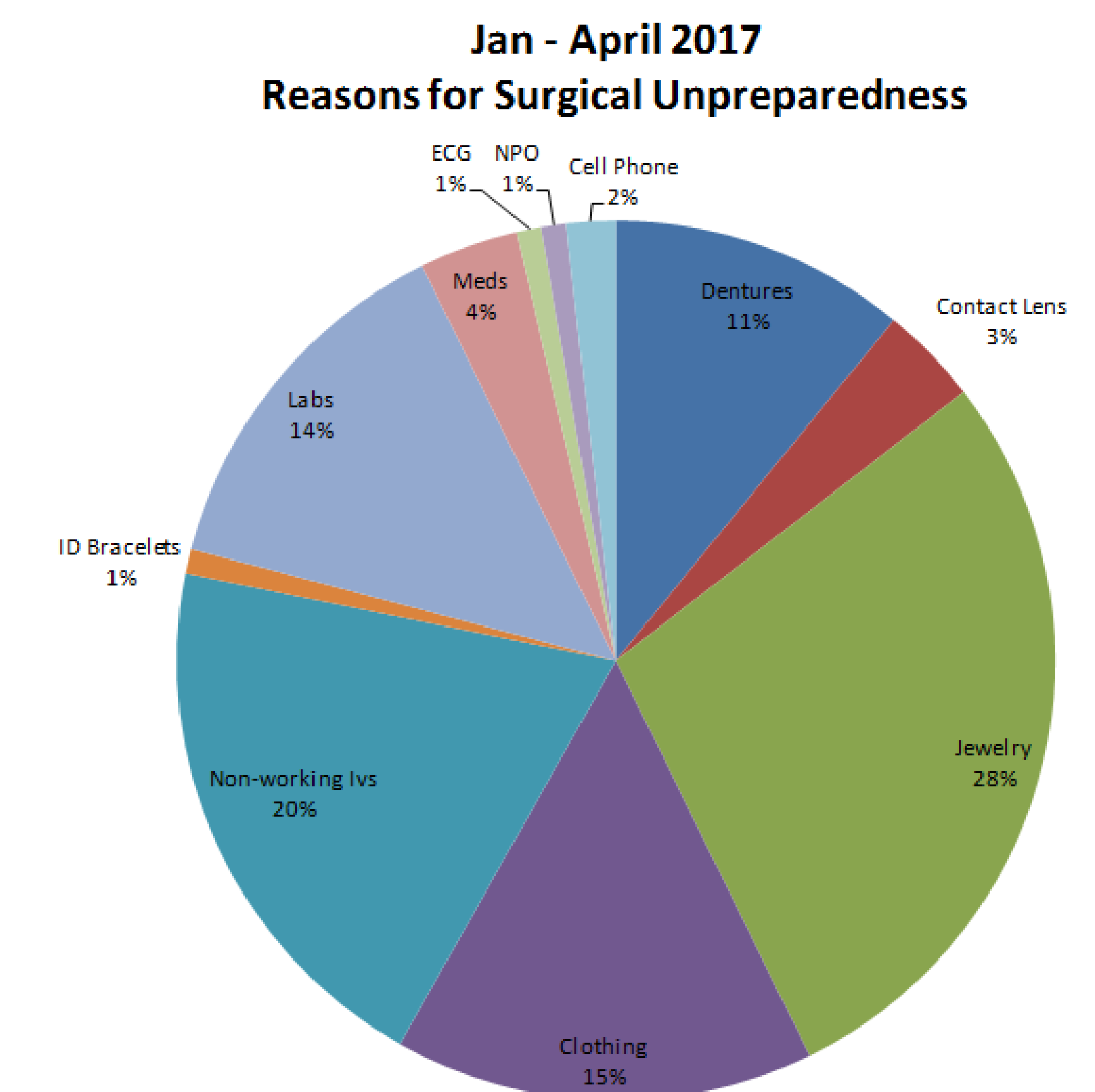
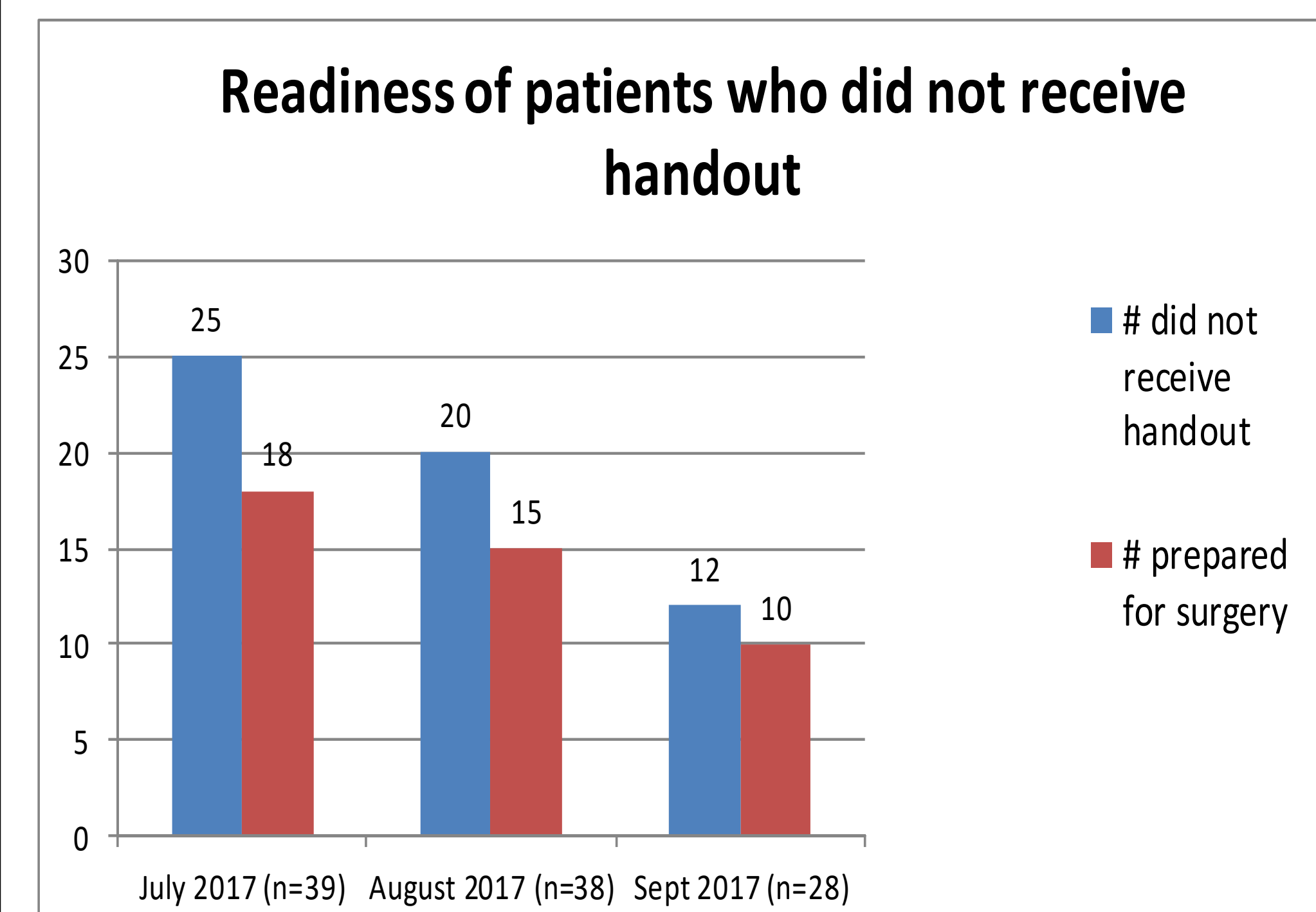
## Results

Of the 105 patients polled during a three month period, 45% reported receiving the patient education tool. Of that group, 98% arrived to the Holding Area prepared for their procedure/surgery. The 2% that were not ready after receiving and reading the education tool stated they forgot. Of the 55% that did not receive the educational tool, only 75% arrived prepared for their procedure. We then reeducated the staff from the three units trialing the tool, which resulted in an increase in the number of patients who reported that they received the educational handout the following month. We also expanded the distribution of the educational tool to include another medical/surgical unit which increased our percentage of patients arrived prepared. The study is ongoing.

## Conclusions

The feedback we have received from both the staff trialing the tool and the patients has been very positive. Several patients stated they felt the tool to be very informative and helped them to understand what they could do to prepare for their surgery/procedure. Communication with the nurses and ANCs of these floors is continuing with additional in-servicing of the staff as needed. We plan to continue with this study with the hope that the educational tool will be adopted by the entire facility.

*Are you ready?*



## Bibliography

1. Kruzik, N. (2009). Benefits of preoperative education for adult elective surgery patients. *AORN Journal*, 90(3), 381-387. doi:10.1016/j.aorn.2009.06.022
2. Van Winkle, R. A., Champagne, M. T., Gilman-Mays, M., & Aucoin, J. (2016). Operating room delays. *CIN: Computers, Informatics, Nursing*, 34(6), 247-253.

## Patient Handout

**Reminder!** **Preparing for your Surgery**  
To help you prepare for your upcoming surgery, please review the following information and instructions.

**NO**

- No food or drink after midnight on the night before surgery, no gum, no mints, no communion, no mouth swabs – this reduces the risk of aspiration during surgery.
- Some medications may be taken with a small sip of water the morning of surgery – NO applesauce.

**NO**

Remove:

- All jewelry & piercings – electrocautery used during surgery may cause burns if jewelry is present.
- Contact lenses to prevent corneal abrasions.
- All dentures & partial plates to prevent airway obstruction.
- Clothing & under garments – no bras or underwear.

**YES**

- Please use the restroom before you are picked up for your surgery.
- Ask your nurse if you are unsure of anything.
- If you are an "add-on" for the day, be prepared to go anytime during the day.