PLACING REGIONAL ANESTHESIA BLOCKS IN THE PREOPERATIVE UNIT

Team Leader: Maria Gutierrez BSN RN CPAN

Memorial Care Saddleback Medical Center Laguna Hills, California

Team Members: Shannon Biehn BSN RN CAPA,

Amor Eluna BSN RN CCRN CPAN, Patricia Mendoza BS RN CAPA

Background Information: The use of regional anesthesia can have a profound effect in a patient's postoperative course. Patients receiving them emerge from anesthesia with less pain, decreasing the need for opioids. Placing regional blocks in the pre-operative department is gaining recognition as a means to increase productivity in the OR. With turnover times averaging 45 minutes, the surgical department of Saddleback Medical Center collaborated to improve productivity. The initiation of regional anesthesia in the pre-operative department was implemented to decrease turnover times in the OR.

Objectives of Project: The primary objective for this project was to improve turnover time in the OR by performing regional blocks in the preoperative department.

Process of Implementation: Policy, standard work and training was developed and implemented. Comprehensive education and training was provided to nursing staff. Staff attended an anesthesiologist led in-service, received capnography training and an EKG course. This ensured that nurses were prepared to assess, diagnose and intervene rapidly in the event of an untoward reaction associated with the administration of regional anesthesia. Fear that the monitoring requirements for these patients would hamper efficiency, a unit specific plan to manage patient flow was developed. This involved multiple departments. The collaboration and communication between all involved departments was essential to the success of this project.

Statement of Successful Practice: The placement of regional blocks in the preoperative department has helped the OR in achieving a 7 minute reduction in overall turnover time from 2016- 2017. Indirectly, the placement of regional block in the pre-operative department decreased the length of time Total Knee Surgery patient, who received anesthesia block, stayed in PACU by 31 minutes. These patients are also noted to be sent home a day early.

Implications for Advancing the Practice of Perianesthesia Nursing: The placement of regional blocks in the perioperative setting serves as method to improve patient satisfaction. Productivity in the OR has increased by placing regional blocks in the pre-operative department. Patients receiving regional anesthesia need to be monitored for rare but severe complications. Skills obtained through this project elevated nursing knowledge and promoted autonomy with our nursing practice. MemorialCare Saddleback Medical Center continue to work with anesthesiologists to better identify cases that will benefit from placement of regional anesthesia blocks.