

BACKGROUND

- ❖ Orthopedic team began booking total-joints for same day surgery
- ❖ Knowledge deficit among nursing identified regarding discharging total-joints same day

PURPOSE

- ❖ Goal: Ensure safe discharge on post-op day 0
- ❖ Provide RN education on Lovenox and antibiotic requirement for discharge
- ❖ Collaborate with physical therapy for clearance protocols
- ❖ Identify process for the set up of outpatient services

STAKEHOLDERS

Orthopedic Surgeons
 Orthopedic Nurse Practitioner
 Case Management
 Physical Therapy
 PACU Management
 PACU Staff

IMPLEMENTATION

- ❖ Met with stakeholders to identify service specific discharge requirements
- ❖ Issues: case management coverage, Lovenox teaching, timely physical therapy evaluation, nurse education on discharge milestones
- ❖ Quick reference nursing tip sheet drafted, reviewed, accepted and implemented

Orthopedic Same Day Discharge "Tip Sheet"

STAGE 1 Phase 1 Care complete Or Completion of Spinal Patient Enters Phase 2	Mobilize	If safe and able, mobilize patient OOB to chair ASAP (when phase 1 care complete, prior to PT arrival if able)
	Physical Therapy	1. Contact PT regarding consult time/plan to go home <ul style="list-style-type: none"> • Find assigned PT on "Care Team" in Epic 2. Have pain well controlled prior to PT c/s
	Case Manager (Lauren Friel until 2PM weekdays, ED CM until 4:30 PM #9446)	1. Contact CM to ensure VNA/PT is set up for home visits 2. Ensure prescriptions are sent to pharmacy for patient pickup 3. Inquire about Lovenox cost with CM (if ordered)
	Diet & Voiding	1. Ensure patient is tolerating a regular diet 2. Ensure patient is voiding post-op <ul style="list-style-type: none"> • Needs to void prior to discharge
Stage 2 Teaching	Anticoagulation	1. Identify if patient will be going home on lovenox, ASA, or chronic AC (needs to have one or the other) 2. Attach teaching document to AVS ("Clinical references")
	IF LOVENOX: Go to "PACU team drive". Click on "Patient Education". Click on "Lovenox Teaching". Have patient watch video (via hyperlink). Follow lovenox teaching page to add education to AVS.	
	IF DOSE NOT DUE: Have patient practice injection with injection mannequin (located in clean supply room)	
	Dressing	1. Ensure long mepilex dressing is <u>SENT HOME</u> with patient for change on POD #7. VNA to assist.
Stage 3 Discharge	Pain & Antis	1. Review pain med regimen with patient including side effects 2. Pt will need total of 3 doses antibiotic. Ensure a dose is sent for home (2x IV here and 1x PO at home) 3. Attach teaching document to AVS ("Clinical References")
	Ortho Team	1. Obtain discharge order from orthopedic service once all goals met (cleared PT, tolerated diet, voided, pain controlled)
	Paperwork/AVS	1. Print AVS 2. Review and ensure understanding of all discharge teaching and instructions 3. Fax: VNA papers to agency if NOT Lahey health at home
	Discharge	1. Ensure safe ride home, and will not be home alone 2. Wheelchair to lobby/car

CONCLUSIONS & RESULTS

- ❖ Same day discharge process streamlined
- ❖ Next day post-op phone calls completed to ensure discharge comprehension & comfort and safety of patient at home
- ❖ Data collected Oct 2021 – Mar 2022 regarding length of stay (LOS) in PACU and percentage of all elective total joints sent home
- ❖ Average LOS: 6.16 hours
- ❖ October 2021-March 2022: 318 total-joint patients with 127 of these patients sent home
- ❖ 40% of total joints sent home

NEXT STEPS

- ❖ Address roadblocks that prevent discharge (i.e. hypotension, urinary retention, failed physical therapy evaluation)
- ❖ Communicate with orthopedic clinic regarding improvement opportunities
- ❖ Continue conversations with anesthesia providers regarding noted roadblocks

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