



INTRODUCTION

- Efficiency in the operating room (OR) is the driving factor for cost containment and enhancing productivity.
- RNs in the post anesthesia care unit (PACU) routinely put the OR on hold.
- OR costs range from \$7 to more than \$100 dollars per minute.
- Increased hold times results in increased costs, long work days, decreased physician and nurse satisfaction, and unplanned overtime.

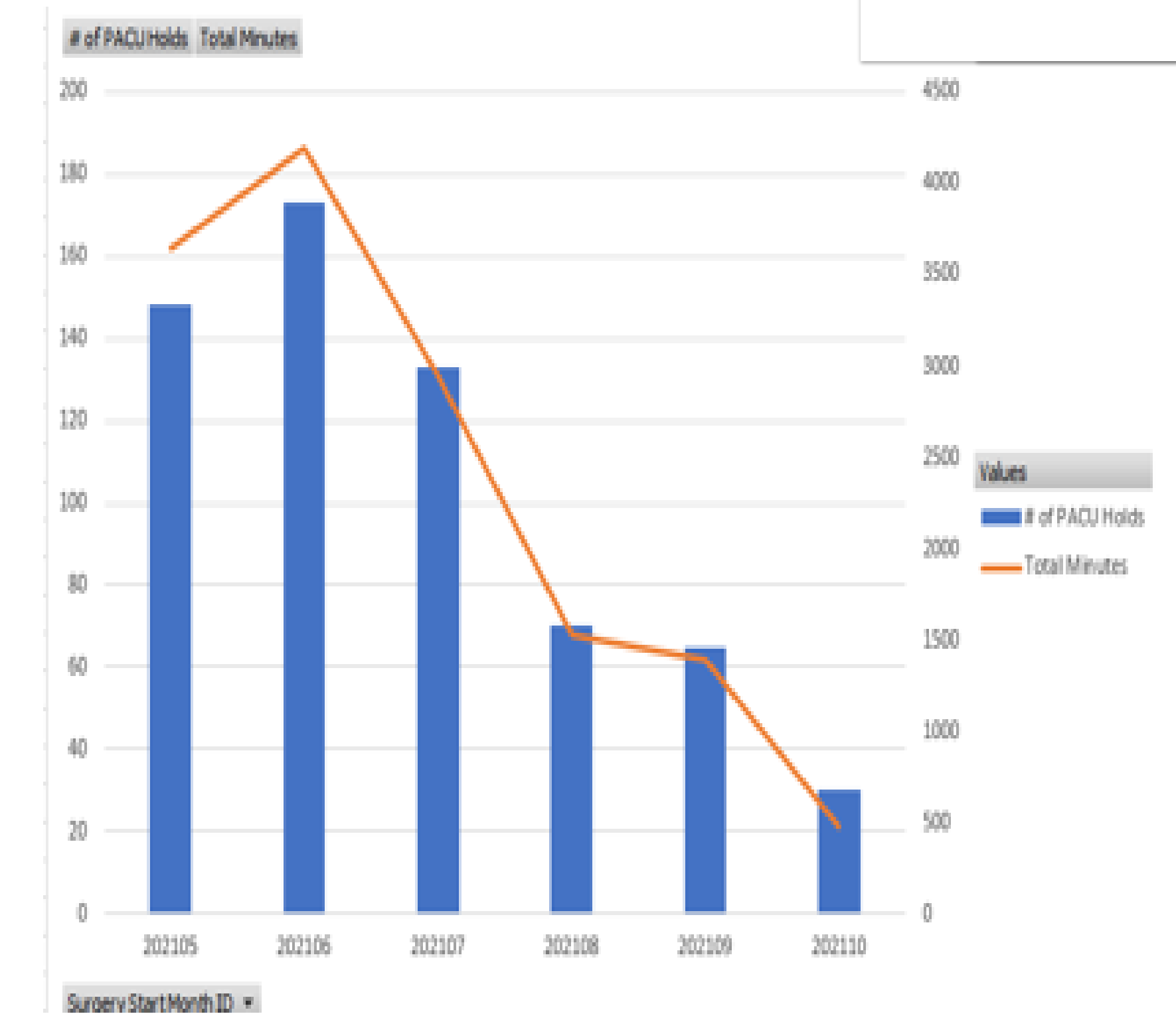
OBJECTIVES AND METHOD

- The purposes of this study were three-fold.
- To decrease the number of occurrences and length of PACU hold times.
- To improve our processes to facilitate throughput.
- Develop a standard work process for transition of care from Phase 1 to Phase 2 recovery.
- Hospital administration and PACU leadership participated in a rapid improvement experiment (RIE) to reduce PACU hold times by 35%.
- This project used the A3 management process.

RESULTS

Results

- PACU beds were available for patients sooner.
- Total hold time was 14,189 minutes.
- By eliminating PACU holds, this translates up to \$1,418,900 saved.



BACKGROUND

PACU throughput barriers include delays in inpatient bed placement, nurse-to-nurse handoff, lack of discharge or transfer orders, pain management, and postoperative nausea and vomiting.

IMPLICATIONS FOR ADVANCING PACU NSG

- Applying Lean management principles to hold times improved patient throughput.
- Standardized work processes and revision of the visual management board have promoted a continuous improvement environment in the PACU.
- The team continues to keep OR hold times to a minimum.

REFERENCES

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