

Implementing a PACU Comprehensive Unit Based Safety Program (CUSP): Ensuring Patient Safety

Team Leader: Maria Liza Anicoche MSN RN ACNS-BC CPAN CAPA

Team Members: Laura Kaiser MSN RN CPAN,
Myrna Mamaril DNP NEA-BC CPAN CAPA FAAN FASPAN,
Amaryllis Ponce BSN RN CPAN CAPA, Patricia Bulacan BSN RN CPAN CAPA,
Grace Mugambi BSN RN
Johns Hopkins Hospital, Baltimore, MD

Abstract Background Information: A comprehensive unit-based safety program (CUSP) for the perianesthesia unit in the PACU that meets on a monthly basis to review nursing practice issues, patient safety events. This CUSP program is a multidisciplinary professional meeting that reviews perianesthesia practice issues and adverse patients' events. PACU staff reported that the GYN surgery patients were experiencing two to three hours of Phase I length of stay (LOS) due to a new preoperative surgical protocol that consisted of Gabapentin 600 mg po, and Scopolamine patch were prescribed in pre-op.

Objectives of Project: The multidisciplinary CUSP team reviewed the patients safety causes of delayed awakening and prolonged LOS in the PACU.

Process of Implementation:

1. Identified that preoperative medications given for the GYN patients caused a delayed awakening from anesthesia and were too sleepy to progress in a timely manner to meet Phase I discharge criteria.
2. Key stakeholders (Director of pharmacy and GYN attending surgeons) reviewed the pharmacologic effects of the preoperative medications and their interactions with anesthesia.
3. The GYN surgeons recommended: the use of scopolamine patches only to patients who are high risk and those who have history of post op nausea and vomiting (PONV); and reduced the Gabapentin dose to 300mg.

Statement of Successful Practice: Currently, GYN patients are safely and timely meeting the 90-minute PACU Phase LOS, with no PONV problems and reporting greater satisfaction with their surgical experience.

Implications for Advancing the Practice of Perianesthesia Nursing: Foremost, the CUSP program is vital to patient safety because of the collaborative efforts of all stakeholders to facilitate change for keeping patient safe.