

Triaging Referrals for Preoperative Evaluation and Management (POEM) Center Appointments

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Abstract Background Information: The Perioperative Evaluation & Management (POEM) center is a clinic where patients are assessed and screened for past medical, surgical, and anesthetic history prior to arrival for a planned procedure requiring anesthesia services. It provides a place for patients to discuss their upcoming anesthetic and have their questions about the process answered. The Perioperative Evaluation and Management (POEM) center serves as entire institution's PAT (Pre-Admission Testing) hub.

The POEM center offers in-person visits as well as telehealth visits by phone or video. Patients with complex medical histories and those scheduled for complex multi-surgeon cases benefit from in-person assessments by Advance Practice Providers (APPs) and physicians. These patients often require additional workup and extensive care coordination to develop a preprocedural plan. Patients scheduled for procedures outside of the OR and patients scheduled for straightforward single-surgeon cases who do not have complex medical histories can be accommodated with telephone assessments with a Registered nurse (RN). Video assessments are intended for patients with multiple comorbidities, or complex medical histories managed by the APP team.

These criteria can be subjective, which resulted in patients being scheduled for suboptimal appointment types.

Objectives of Project: To create a standardized process for determining the POEM appointment type that will add the most value to the patient's perioperative experience.

Process of Implementation: A bilevel evaluation system for evaluating referrals to the POEM center was developed. The PSC (Patient Service Coordinator) reviews the referral and schedules the POEM appointment based on criteria in the PSC scheduling matrix. The referral is escalated to a RN for clinical review to determine the appropriate appointment type if the patient does not meet the PSC's scheduling criteria.

Statement of Successful Practice: Implementation of the referral triaging process has led to a 2.5% increase in telephone assessments and 1.2% increase in video assessments over last year while maintaining a same-day OR cancellation rate below 4%.

Implications for Advancing the Practice of Perianesthesia Nursing: This initiative has facilitated the increased use of telehealth to provide pre-procedure care for patients scheduled with procedures requiring anesthesia services.