A Clear Path Forward: Improving Perioperative Communication

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Abstract Background Information: Safe, timely surgery depends on clear communication and reliable handoffs across the perioperative team. Epic OpTime supports this with the Status Board and three icons: R for nursing, S for surgery, and A for anesthesia. In our process, the perianesthesia nurse records R and S. Staff conversations and chart audits revealed varied interpretations, and uncertainty about what belonged under each icon led to inconsistent use. R and S were often selected together rather than in sequence, obscuring remaining work and prompting unnecessary calls.

Objectives of Project: This project aims to standardize which tasks belong under the R, S, and A icons in Epic OpTime, make pending work visible on the Status Board, reduce nonessential calls, and enable timely and safe care through clear criteria and reliable handoffs.

Process of Implementation: An interprofessional workgroup from surgery, anesthesia, intraoperative nursing, and perianesthesia nursing defined the tasks for each OpTime status icon R, S, and A. The agreed definitions specified actions owned by each discipline and included confirmation checks for work completed by another team member. After consensus, education was delivered through department meetings and huddles. Visual wall clings with the icon definitions were installed in all Preop and intraoperative areas to support daily use and reinforce standardization.

Statement of Successful Practice: Following implementation, perioperative disciplines shared a clear understanding of which tasks belong under each icon. When only S remained, charge nurses used it as a cue to contact surgery and resolve outstanding items. Perianesthesia nurses documented R and S separately rather than together. Excluding rollout months (October through December 2024), weekdays from January through September 2024 versus 2025 show R and S clicked off at the same time declined from 33.83 percent to 26.99 percent, a 6.84 percentage point decrease ($p < 0.0001$). This improved board accuracy, visibility, handoffs, and timely escalation.

Implications for Advancing the Practice of Perianesthesia Nursing: Standardization and clear communication are central to OR readiness and patient safety. Aligning teams on shared criteria and consistent documentation in the preanesthesia phase of care allows existing systems to present a shared status, make remaining work visible, and strengthen handoffs. This education-focused approach is low cost and transferable across perioperative settings.