

Optimizing Preoperative Workflow: Addressing Delays in Plastic Reconstruction Service Marking to Improve Efficiency

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Abstract Background Information: In an organization that performs a high volume of plastic reconstructive surgeries (PRS), both elective and clinically indicated, preoperative staff were uncertain if the plastic surgeon needed to mark the surgical site and for symmetry. This initiative aligns with the Joint Commission National Patient Safety Goal for surgical site verification. Currently, the Epic Surgical Board contains a "SPECIAL NEEDS" section that allows providers to free-text necessary surgical considerations. However, this feature is underutilized by most team members.

Objectives of Project: This project aims to improve OR efficiency by reducing delays related to PRS site markings for the first start cases. By standardizing communication between the PRS team and the preoperative staff through consistent use of the "Special Needs" section, the project seeks to reduce the PRS-related OR delays by 50%.

Process of Implementation: Several targeted strategies were introduced:

- A standardized communication format was developed by the charge nurses for the providers to answer specific questions regarding the need for surgical marking in the "Special Needs" section
- An email campaign was launched to remind providers to utilize the "Special Needs" section the day before the surgery. Charge nurses will share the information with the team, reducing wait times
- The charge nurse confirmed the "Special Needs" section was completed
- Data was collected and analyzed using the Pareto and Histogram charts, showing a noticeable reduction in the PRS-related first case delays

Statement of Successful Practice: Data comparing the six months before and after implementation revealed significant improvements:

- First-case PRS markings delays were reduced from 12% to 6%
- Compliance with using the "Special Needs" section in epic reached 100%

Implications for Advancing the Practice of Perianesthesia Nursing: This project demonstrates how improved interdisciplinary communication can directly impact surgical efficiency and patient safety. By standardizing preoperative communication protocols, the initiative not only reduced delays but also promoted a higher standard of care and enhanced satisfaction among stakeholders.