

## **Improve Outpatient Discharge Time for Lumpectomy and/or Sentinel Lymph Node Biopsy Patients**

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**Abstract Background Information:** Breast lumpectomies are among the most commonly performed procedures at the Josie Robertson Surgery Center (JRSC), with over 2,000 cases annually. These minimally invasive procedures typically require short recovery periods and are ideal for outpatient care. In 2023, a quality improvement project was initiated to align JRSC's practices with other Memorial Sloan Kettering Cancer Center (MSKCC) sites by targeting a 90-minute discharge time from the post-anesthesia care unit (PACU) for patients undergoing lumpectomy with or without sentinel lymph node biopsy (SLNB).

**Objectives of Project:** Project objectives included reducing discharge times, improving PACU bed availability, and accommodating an increasing surgical volume. A multidisciplinary approach guided the implementation. PACU nurses collaborated with colleagues from MSKCC Main Campus, breast surgeons, and office practice nurses to align expectations and standardize discharge processes. Key interventions focused on optimizing patient and caregiver education, emphasizing that patients who are hemodynamically stable can expect to be discharged within 90 minutes.

**Process of Implementation:** Education was provided to both preoperative and post-anesthesia nurses regarding expected procedure and recovery times, typical post-operative pain, and appropriate pain management strategies. Caregivers were directed to designated waiting areas to support timely discharge. Additional nursing strategies included early pain assessment, offering oral fluids as tolerated, and keeping lights on to promote wakefulness.

### **Statement of Successful Practice:**

Length of stay (PACU)  
< 90 min 90-120 min > 120 min  
Pre-Pilot  
(Jan-Jun 2023) 7% 23% 70%

Length of stay (PACU)  
< 90 min 90-120 min > 120 min  
Jul 2023 27% 35% 39%

Baseline data supported the need for change, and post-implementation audits confirmed a consistent decrease in discharge times. The initiative demonstrated that targeted education, interdisciplinary communication, and standardized discharge planning can effectively streamline patient flow and enhance outpatient experience.

**Implications for Advancing the Practice of Perianesthesia Nursing:** Sustained success will depend on continued staff involvement, regular audits, and further refinement of perioperative protocols. Follow-up data from April–May 2024 and May–June 2025, post EPIC go live, confirmed that discharge time improvements were maintained, demonstrating the long-term value of structured, team-based approaches in advancing peri-anesthesia nursing practice.