

Bridging the Gap: Addressing the Lack of Documentation of Lines and Drains from OR to PACU

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Background Information

Accurate documentation of lines and drains is critical for ensuring patient safety and continuity of care during the transition from the Operating Room (OR) to the Post-Anesthesia Care Unit (PACU). An issue has been identified concerning the failure of OR nurses to document the placement of lines and drains that are performed intraoperatively by surgeons. This documentation gap can lead to delays in care, increased risk of complications, and communication breakdowns among interdisciplinary teams.

Objectives

To enhance adherence to documentation protocols for lines and drains placed in the OR.

Process of Implementation

The implementation involved a series of live in-service training sessions conducted by the PACU staff for the OR staff over a three-month period. Additionally, the matter was escalated to the MD-RN Committee, which engaged the OR educators to ensure comprehensive education of all personnel regarding line documentation protocols.



Statement of Successful Practice

Preliminary findings from a three-month retrospective chart review indicated that in over 40% of cases, at least one line or drain was not documented by OR nurses prior to the transfer to the PACU. Following the collaboration with OR education, PACU nurses have reported a notable enhancement in the accuracy of lines and drains documentation by OR nurses, with fewer than 10% of patients now missing the correct line or drain information.

Implications for Advancing the Practice of Perianesthesia Nursing

The retrospective chart review highlighted significant gaps in documentation practices among OR nurses regarding lines and drains before patient transfer to the PACU. To address these issues, ongoing training in communication, regular education on documentation, and interdisciplinary collaboration are essential. Integrating quality improvement initiatives, utilizing technology like prompts in electronic health records (EHR), and focusing on patient safety will ensure accurate documentation and enhance overall patient care. Ultimately, these efforts will improve nursing efficiency and maintain high safety standards.

Conclusion

The lack of documentation of lines and drains by OR nurses poses a significant risk to patient safety and care continuity. Implementing standardized checklists, enhancing interdisciplinary communication, and reinforcing accountability through education and policy changes are essential steps toward improving documentation practices.

