

Improving PACU Efficiency: Reducing Post-Anesthesia Length of Stay for Orthopedic Patients Through Inpatient X-Ray Implementation

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Background Information

Recognizing shortcomings in the perioperative protocol is vital for improving surgical efficiencies and elevating patient satisfaction. A quaternary academic medical institution based in Los Angeles, California, has been experiencing extended durations of stay in the Post-Anesthesia Care Unit (PACU) for its surgical patients. In response, the unit leadership from the 7-PACU and 7-North (inpatient orthopedics) collaborated to implement a new practice for post-op X-rays, with the goal of reducing the PLOS (PACU length-of-stay) for orthopedic inpatients.

Objectives

To reduce the mean PLOS for inpatient orthopedic patients over a 4-week period.

Process of Implementation

In collaboration with the leadership of the inpatient orthopedic unit, a change was implemented that allowed post-operative X-rays to be conducted in the inpatient rooms. This new process differed from the previous workflow, which required post-operative X-rays to be performed in the PACU before transferring patients.

Statement of Successful Practice

A reduction in PLOS was observed over a period of 4 weeks. PLOS was measured from “In PACU” time to “PACU Care Complete” time.

- Pre-Implementation: June 27 to July 27, the mean PLOS was 89 minutes.
- Post-Implementation: July 28 to August 29, the mean PLOS was 71 minutes.

This reflects a 20.22% overall reduction in the average PLOS.

Implications for Advancing the Practice of Perianesthesia Nursing

The intervention implemented has successfully reduced the mean PLOS for inpatient orthopedics. Future studies will investigate the sustainability of this intervention beyond 4 weeks, its applicability to other surgical populations, and its impact on patient outcomes, staff overflow, and overall hospital efficiency. Additional research may also explore cost-effectiveness and patient satisfaction to determine broader adoption potential.

