

Nurse Initiative Driven Project Results in Increased Patient Satisfaction Scores Vida Lew BSN, RN CPAN; Laura Gallego BSN, RN, CCRN; Kevin Lyons BSN, RN, CCRN;

Dolores Buonacuore BSN, RN, CAPA; Michelle Weston MBA, BSN, RN, CNOR; Sandra Martin RN, BSN; Virtua Marlton



## Background

Recovery Room Main acquired Interventional Pulmonary procedures within the last vear. Lack of standardized discharge instructions for patients were noted by the PACU nurses. Physicians did not place additional discharge instructions related to the procedure, which did not meet JCAHO requirements for transition of care. This was reflected in the low patient satisfaction scores obtained from the NRC Health Patient Satisfaction Survey.



Flexible Bronchoscopy and Biopsy

# **Objectives**

- 1. Initiate a project to increase patient preparedness for discharge including:
- Prepare for Recovery
- What to do for Bleeding
- · What to do for Infection
- What to do for Pain

with 2. Collaborate interdisciplinary departments to enhance relationship-based care.

3. Increase patient satisfaction score obtained by NRC Health Survey by ensuring that patients knew when to seek immediate medical attention.

## **Methods**

1. Collaborated with Endoscopy Procedure Nurse to develop specific procedure discharge instructions.



2. Instructions were presented and approved by head of Interventional Pulmonology.

> Navigational Bronchoscopy/Endobronchial ultrasound **Discharge Instructions**

- 1. You will experience a sore throat for 24 to 48 hours. You may use throat lozenges or gargle with salt water to relieve the discomfe
- 2. It is normal to have cough for 24 hours after procedure 3. It is normal to have a low-grade fever after procedure.
- 4. It is normal to have small amounts of blood in your sputum or saliva after procedure. Especially if biopsies, fine needle aspiration, or transbronchial biopsies are performed.
- Results of biopsies or specimens will take 3 to 5 business days. Results will be reviewed at follow up appointment. 6. Resume your normal diet unless otherwise directed by physician
- 7. Resume your current medications unless otherwise directed by your physician. Instruction will be in discharge medication reconciliation i these instructions.
- 8. Please call Physician in the event you experience any of the follow symptoms. a. Difficulty breathing.
- b. Neck swelling.
  c. Fever over 101 for more than 24hrs that does not break with Tylenol. d. Coughing up bright red blood, large clots or worsening of bleeding
- Small amount of blood in sputum is normal. e. Severe onset of shortness of breath accompanied by severe chest
- and shoulder pain is an emergency. Please call 911 or go to closest emergency room.

## **Methods (Continued)**

3. Discharge instructions were sent to EPIC to be downloaded into system under specific heading of: Navigational Bronchoscopy. Endo Bronchial Ultrasound, and OR Bronchoscopy.

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4. Worked with EPIC principal trainer to develop tip sheets for physicians and nurses to access discharge instructions and enter into the After Visit Summary.

#### New Patient Discharge Education SmartText

 The following discharge SmartTexts have been added to the Epic Discharge Education field: Educatio

- Jucation field: a. OR BRONCHOSCOPY DISCHARGE INSTRUCTIONS
- b. OR COLONOSCOPY DISCHARGE INSTRUCTIONS
- C OR EGD DISCHARGE INSTRUCTIONS
  C OR EGD DISCHARGE INSTRUCTIONS
  NEW JERSEY UROLOGY URETERAL STENTS DISCHARGE INSTRUCTIONS
  NEW JERSEY UROL VIONEY/URETERAL STONE SURGERY W//VRETERAL STENTS DC INSTRUCTIONS

 f. OR TEE DISCHARCE INSTRUCTIONS
 f. OR TEE/CARDIOVERSION DISCHARCE INSTRUCTIONS
 From the Discharge activity, in the Discharge Education section, open the
 SmartText entry field and search one of the new educational SmartTexts to insert it nto the patients After Visit Summary

5. Educational in-service provided to PACU staff regarding unfamiliar procedures.



## **Results**



As a result, patient satisfaction scores increased in every category. Two categories, "Prepare for Recovery" and "What to do for Pain" increased to 100% from the NRC Health Survey, Also, less issues were noted during post-op phone calls. Nurse satisfaction increased because nurses felt more equipped to provide better discharge instructions.

