Face to Face Education For Hysterectomy Patients to Decrease SSI Tiffany Mitchell, MSN, MHA, RN, NEA-BC, PCCN & Andrea Ramos, MSN, RN, CAPA

Introduction

Surgical site infections (SSIs) are the leading cause for postoperative readmissions. Despite the routine use of prophylactic antibiotic therapy, SSIs continue to be the most consequential source of morbidity and mortality in both inpatient and ambulatory settings.

Identification of the Problem

- Sustained SSI rates in abdominal hysterectomy patients, exceeding expected number of infections with a standardized infection ratio (SIR) greater than threshold of 1.0.
- Gap in pre-op education related to phone only Pre-Admit Testing (PAT) assessments.

QI Question

Among abdominal hysterectomy patients receiving face-to-face pre-operative education (how to care for surgical site at home), compared to previous practice of phone pre-operative education, will there be a decrease in 2021 SSI rate?

References

Perioperative Pathways: Enhanced Recovery After Surgery; The American College of Obstetricians and Gynecologists Womens Health Care Physicians; Vol. 132, No. 3, September 2018

Centers for Disease Control and Prevention Guideline for the Prevention of Surgical Site Infection, 2017. JAMA Surg. 2017, 152(8), 784–791. doi:10.1001/jamasurg.2017.0904

Chart



Facility	Date Selector	Infection Code (gr	Observed Infections	Predicted Infections	Day/Procedure Count	Infection Rate	SIR
THHEB	2022	HYST	0.0	0.8	88.0	0.0	0.00
	2021	HYST	4.0	1.9	203.0	2.4	2.64
	2020	HYST	4.0	3.5	301.0	1.4	1.26
	2019	HYST	6.0	4.0	394.0	1.7	1.59

Methods

- PDSA methodology utilized to reinstate face-to-face PAT visits and implement paper SSI checklist May 2021
 - SSI specific education provided
 - Chlorhexidine soap provided
 - Detailed pre-operative education provided
- SSI checklist documentation completed by nursing staff:
 - Diagnostic lab work
 - Nutrition
 - Diabetes
 - Smoking Cessation
 - Pre-op shower
 - Post-operative Expectations

Outcomes/Results

- 2021
 - 3rd quarter: n=65; 2 infections
 - 4th quarter: n=30; 1 infection
- 2022
 - 1st quarter: n=28; 0 infections
 - 2nd quarter: n=47; 0 infections
 - 3rd quarter: n=44; 0 infections
 - 4th quarter: n=63; 0 infections
- This quality improvement project evaluation supported the literature regarding comprehensive pre-operative education to reduce the incidence of SSI.





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Discussion

June – July 2021

Manual audit of SSI checklists for completion

Spreadsheet created for tracking each patient to ensure all were captured until completion of electronic health record report

Staff frustrated with additional documentation

Supply chain issues in June left patients without receiving required chlorhexidine soap for pre-op shower

August – December 2021

RN Clinical Care Specialist developed spreadsheet to track and quantify completion rate of SSI checklist elements

Baseline goals established for SSI checklist elements

Jan 2022 - transition of SSI checklist from paper to electronic health record

Conclusions

• Reinstatement of face-to-face pre-

- operative education helped to
- decrease SSIs in abdominal
- hysterectomy patients
- Continue current process

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