

## **Post-Op Pitstop: When Urinary Retention Delays the Finish Line**

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**Introduction:** In 2024, Texas Health Hospital Rockwall completed over 4,900 surgeries and procedures with only 19 PACU bays accommodating both Phase I and Phase II patients. Post-operative urinary retention frequently delays discharge, exacerbated by the absence of a standardized protocol. To address this issue and improve patient throughput, we developed an evidence-based voiding algorithm for non-urinary surgical patients.

**Identification of the Problem:** Without a formal post-op voiding protocol, care was inconsistent, PACU stays were prolonged, and staff frequently contacted surgeons for discharge orders. This lack of clarity disrupted care coordination and delayed patient flow. A standardized approach was needed to streamline decision-making and reduce unnecessary delay.

**EPB Question/Purpose:** For non-urological outpatient surgical patients aged 18 and older, does implementing a post-operative voiding protocol reduce PACU length of stay?

A literature review via CINAHL identified eleven relevant articles, including studies on urinary retention following total joint and inguinal hernia surgeries, the use of tamsulosin for prevention and treatment, and a consensus statement from the American Urogynecological Society.

**Methods/Evidence:** Using current evidence and inpatient catheterization policies, we developed a post-op voiding algorithm. A multidisciplinary team - including Orthopedists, Anesthesiologists, Urologists, the Chief Quality Medical Officer, and the Entity Chief Nursing Officer - reviewed and refined the protocol. After approval by the Medical Executive Committee and hospital board, staff were educated on Post-Operative Urinary Retention and the new protocol through targeted training sessions.

**Significance of Findings/Outcomes:** Data collection and analysis are currently underway. Final results will be available prior to the conference and will be included in the presentation.

**Implications for perianesthesia nurses and future research:** Standardized, evidence-based protocols enhance care coordination and reduce confusion in clinical decision-making. Further research is needed to investigate the multifactorial causes of post-operative urinary retention, including pre-op, intra-op, and post-op variables.