

Does Strict Adherence to ERAS Protocols Improve Patient Outcomes?

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Practice Problem

ERAS Protocols have long been known to improve patient outcomes after colorectal surgery. There is ample research that proves the effectiveness of ERAS protocols, but how do you ensure compliance in the PACU when staff is inundated with protocols and new procedures that constantly add to their daily workload. How do we fight 'Protocol Fatigue' and ensure patients get the best care.

Literature

A comprehensive review of the literature was performed using Medline, Google Scholar and the BHCS Librarian team. Twelve relevant articles were selected. ERAS protocols contribute greatly to improved patient outcomes. Reduced length of stay (by up to one day), reduction of postoperative complications (by up to 60%), improved GI motility, fewer surgical site infections.



PICOT

P: Postoperative Colorectal ERAS Patients and the PACU Staff that care for them
I: Focused Adherence to the ERAS Protocols related to early mobility and surgical site infection (SSI) reduction.
C: Currently low staff buy in
O: Decrease Length of Stay, Lower SSI, fewer postop complications
T: June 2024-June 2025

Practice Change

Focused education for PACU Nurses on the importance and value of ERAS protocols for colorectal patients and the benefits to their patients when ERAS protocols are followed. The education emphasized early mobilization and temperature management to reduce surgical site infection.

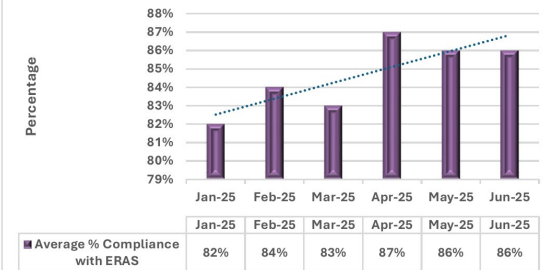
Implementation

- ERAS education posters placed in high visibility areas
- Peer-to-peer discussion of the importance of ERAS protocol adherence
- Pre-education and post-education surveys were performed with PACU nurses to assess knowledge
- PACU supervisors audited patient records for compliance and prompted PACU RNs to document ERAS interventions performed

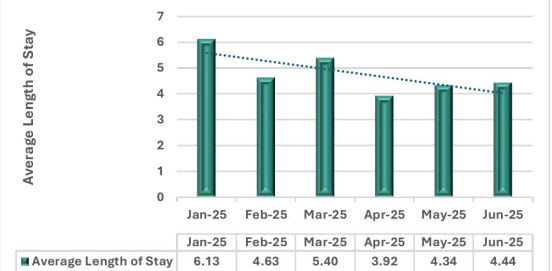
Results/Conclusions

After targeted education for PACU nurses, their understanding of the importance of ERAS interventions improved, compliance with ERAS increased, and the length of stay for colorectal patients was reduced.

Average % Compliance with ERAS



Average Length of Stay



*References available upon request

