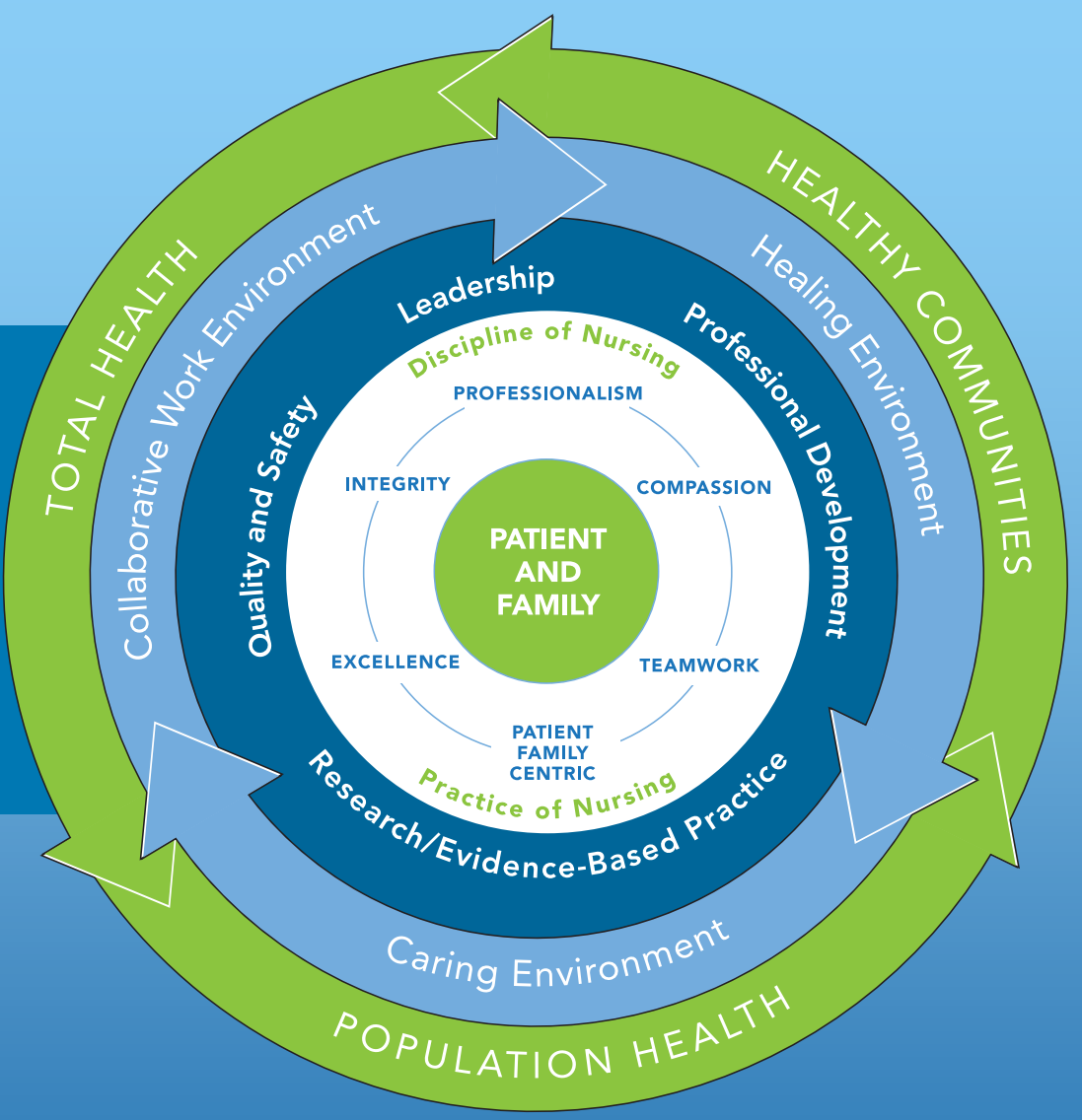


Reducing Preventable Eye Surgery Center Cancellations

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Culture of Excellence



Kaiser Permanente Sacramento Medical Center/NCAL Region Patient Care Services

INTRODUCTION

BACKGROUND

In 2024, the Eye Surgery Center (ESC) experienced 173 preventable same-day surgery cancellations. Despite a high surgical volume, cancellations were largely driven by identifiable patient-related factors.

Top 5 Causes (2024):

- Patient cancellation
- Lack of medical clearance
- Failure to follow NPO guidelines
- Patient postponement
- Lack of a ride

Impact:

- Disrupts surgical schedules
- Increases costs (unused OR time, staffing inefficiencies)
- Delays care and impacts outcomes
- Limits access for other patients
- Reduces patient and staff satisfaction (Meyers, 2021)

PURPOSE

To reduce the rate of preventable, same-day surgery cancellations through targeted interventions aimed at patient education, pre-operative screening, and communication improvements.

AIM

To decrease preventable cancellations by 25%.

METHODS

PLAN

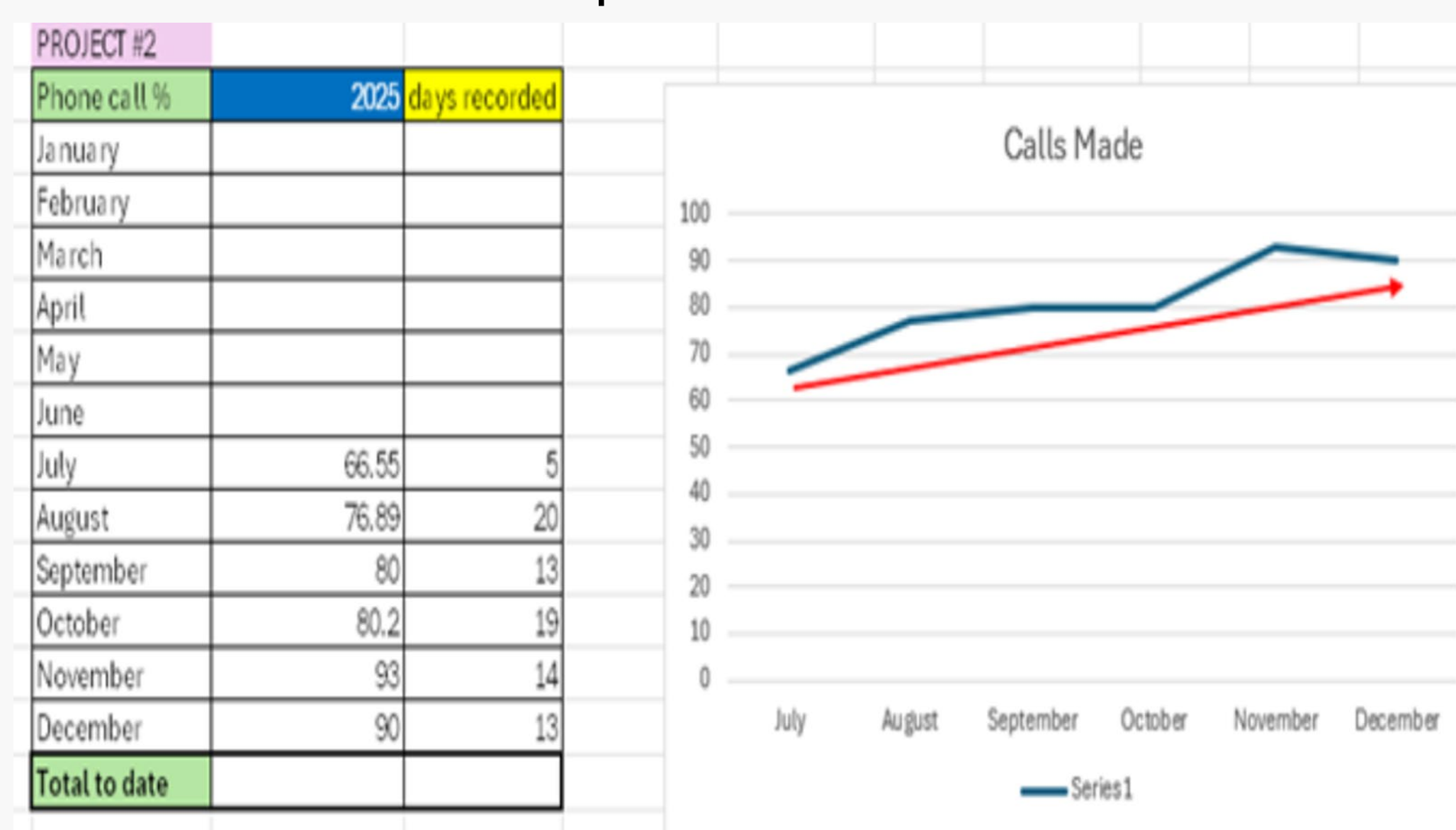
- Reviewed baseline cancellation data and reasons
- Identified key drivers
- Designed targeted interventions
- Interventions were implemented in a phased approach using iterative PDSA cycles.

DO

- Implemented pre-op call team with standardized workflow
- Pre-op screening: Identified patients requiring medical clearance, assessed for active illness/infection, or changes in condition prior to surgery
- Used two call scripts (email read vs. not read)
- Standardized instructions across all platforms
- Sent pre-op emails:
 - 2-week "Welcome" (expectations, medication screening)
 - 2-day reminder (NPO, ride, logistics)
- Implemented an automated phone line providing recorded pre-operative instructions for patients.
- Goal: 100% pre-op call completion (tracked)

STUDY

- Tracked cancellation rates and reasons
- Monitored call completion and workflow



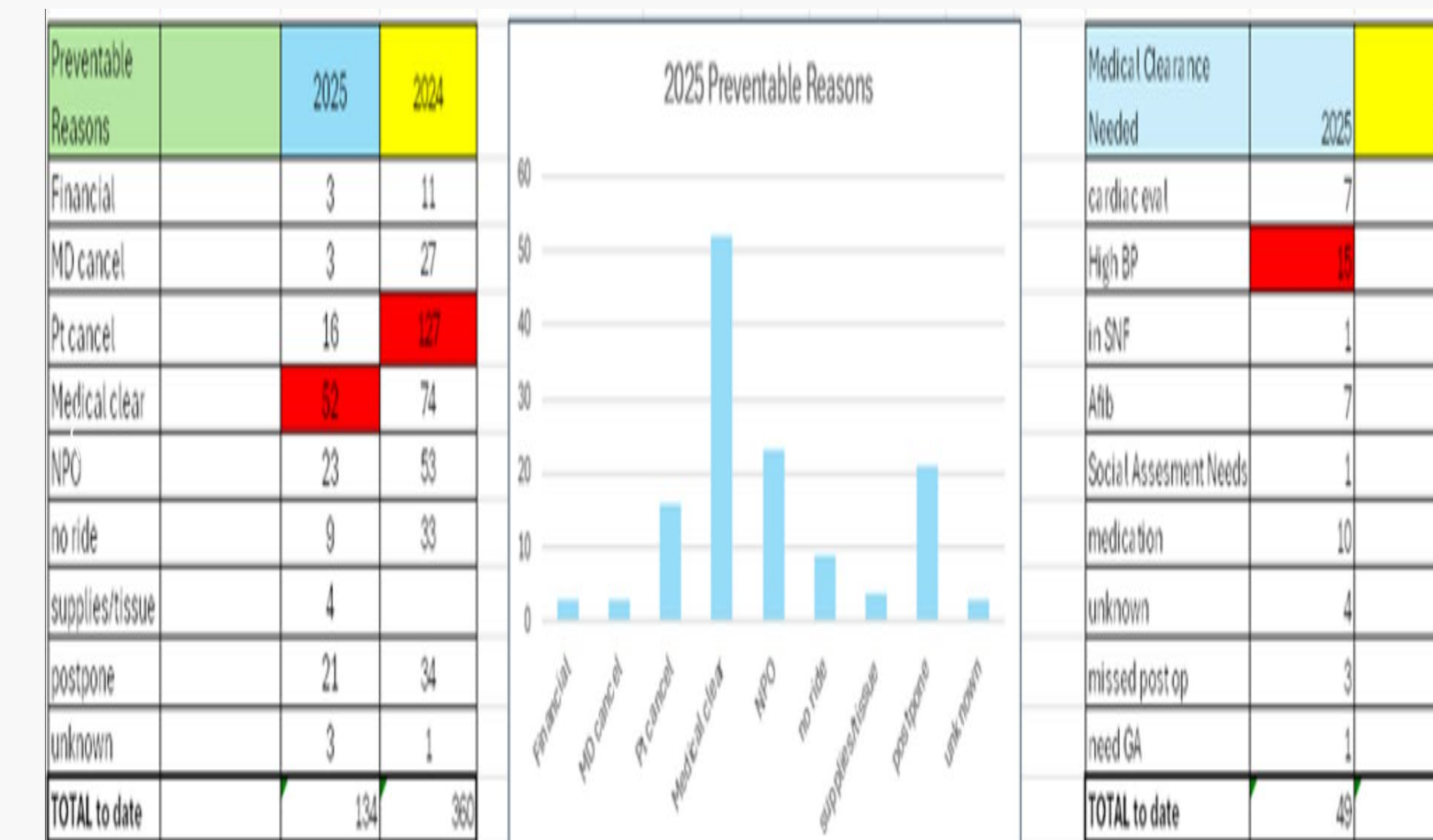
ACT

- Refined workflows based on findings
- Reinforced standardization and staff education
- Sustained improvements

RESULTS or CONCLUSION

Initiated in January 2025, this QI project resulted in a sustained decrease in preventable cancellations within five months of implementing targeted interventions, achieving a 25% reduction by year-end.

Month	2025 Preventable	Total cx 2025	2024 Preventable	comparison year to year
January	16	58	5	11 more
February	14	35	11	14 more
March	15	36	14	15 more
April	13	43	17	9 less
May	12	36	17	6 less
June	12	51	14	4 less
July	15	53	15	4 less
August	9	46	12	7 less
September	6	36	9	2 less
October	5	26	31	28 less
November	11	33	16	33 less
December	8	37	12	
TOTAL to date	136	490	173	
	28% YTD		37% TYD	



IMPLICATIONS FOR PRACTICE

- Dedicated pre-op call team, standardized scripts, and 100% call completion goal improves consistency and patient readiness
- Aligned instructions across platforms (calls, emails, automated messaging) reinforce key requirements (NPO, medical clearance, logistics)
- Proactive screening during calls identifies risks early (health status changes, lack of clearance, transportation barriers)
- **Ongoing focus:** strengthen phone call team communication (1:1 training, email/Teams updates) and improve call completion percentages
- **Future direction:** Align clinic and perioperative teams through standardized pre-op instructions and clear criteria for medical clearance. Establish a consistent process between anesthesia providers and surgeons to identify patients appropriate for same-day surgery versus inpatient care, improving communication, reducing variability, and optimizing patient readiness.

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