

Pre Counseling for Enhanced Recovery After Surgery

Background

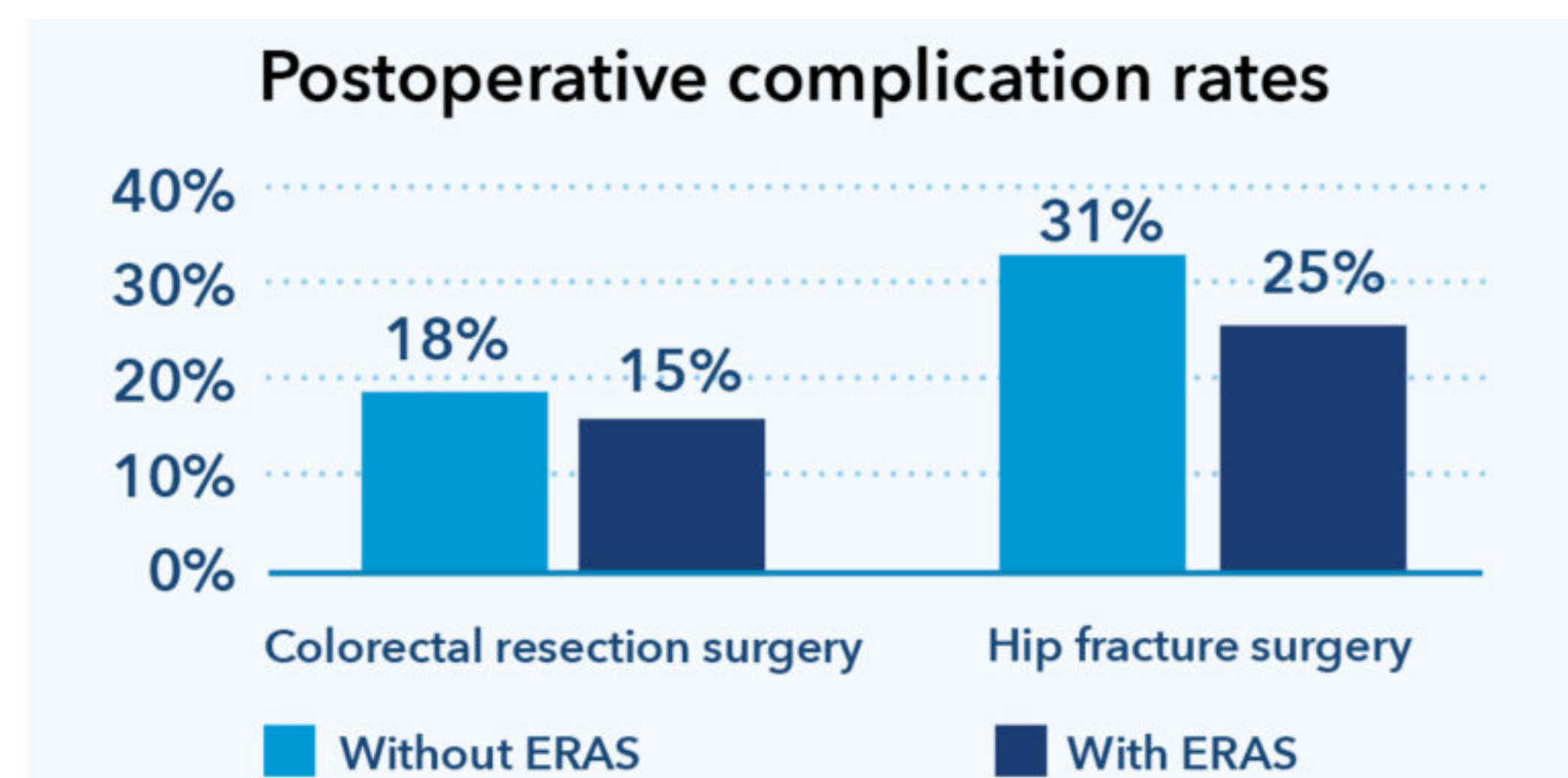
Approximately 25% of all surgery patients across the country suffer from post-surgical complications (kpihp.org, 2023)

Education and counseling on the ERAS pathway during preoperative care are important to achieving desired outcomes.

Importance of Issue

Patients: decreased length of stay in hospital, decreased post-surgical complications, and decreased need for opioid pain medications post-surgery.

Community: discharging patients quickly with less complications increases throughput for other acute issues, decreased rx for opioids decreases the risk of dependence



(kpihp.org, 2023)

Framework

John Hopkins Nursing Evidence-Based Practice Model: allows for nurses to translate evidence into clinical practice

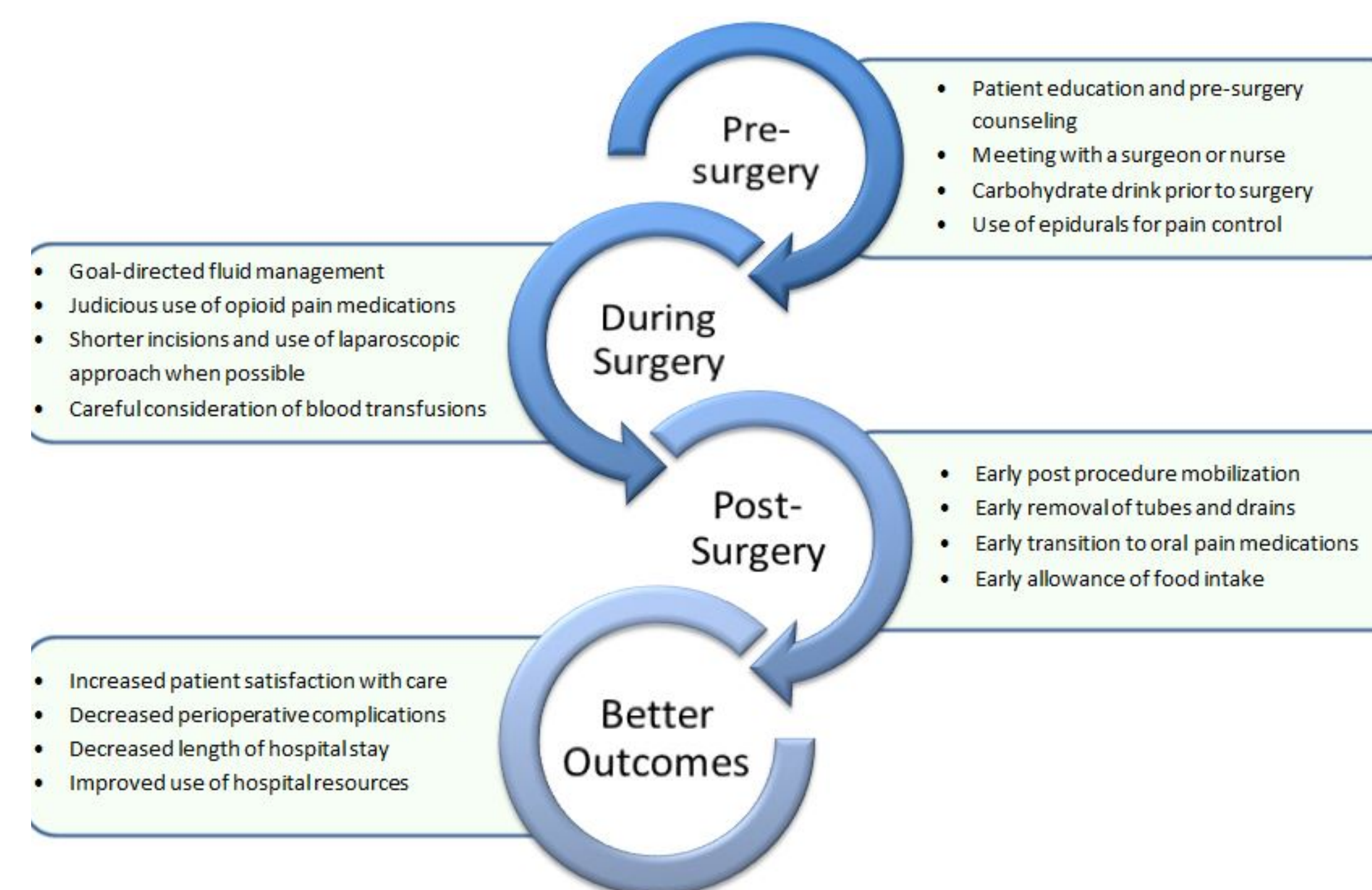
Post surgical complications are common in acute care, one of the major issues is patient non compliance and poor education pre-surgery, using evidence allows for nurses to come up with an approach to solving a common issue with surgical patients.

Key Concepts & Outcomes

Streamlined adaptation of ERAS protocols that begin with pre-counseling and education to patients.

Post-operative care for patients will improve by decreasing post-surgical complications such as thrombus, respiratory illness, ileus and opioid use.

Patients will be able to verbalize three post-surgical interventions that will help decrease recovery time.



med.unc.edu

Interventions & Solutions

Individual Intervention: Provide a clear roadmap of surgical and recovery activities, this encourages the patient to participate actively in their recovery.

Team Intervention: Discuss interventions with patient and have post-surgical plan in place

Policy/protocol interventions: Required pre-counseling and education on ERAS. ERAS protocols are extensive, create a shortened and streamlined set of interventions that are most beneficial based on individual patient needs.

Ana Lilia Alaniz RN, ADN
RN-BSN Student

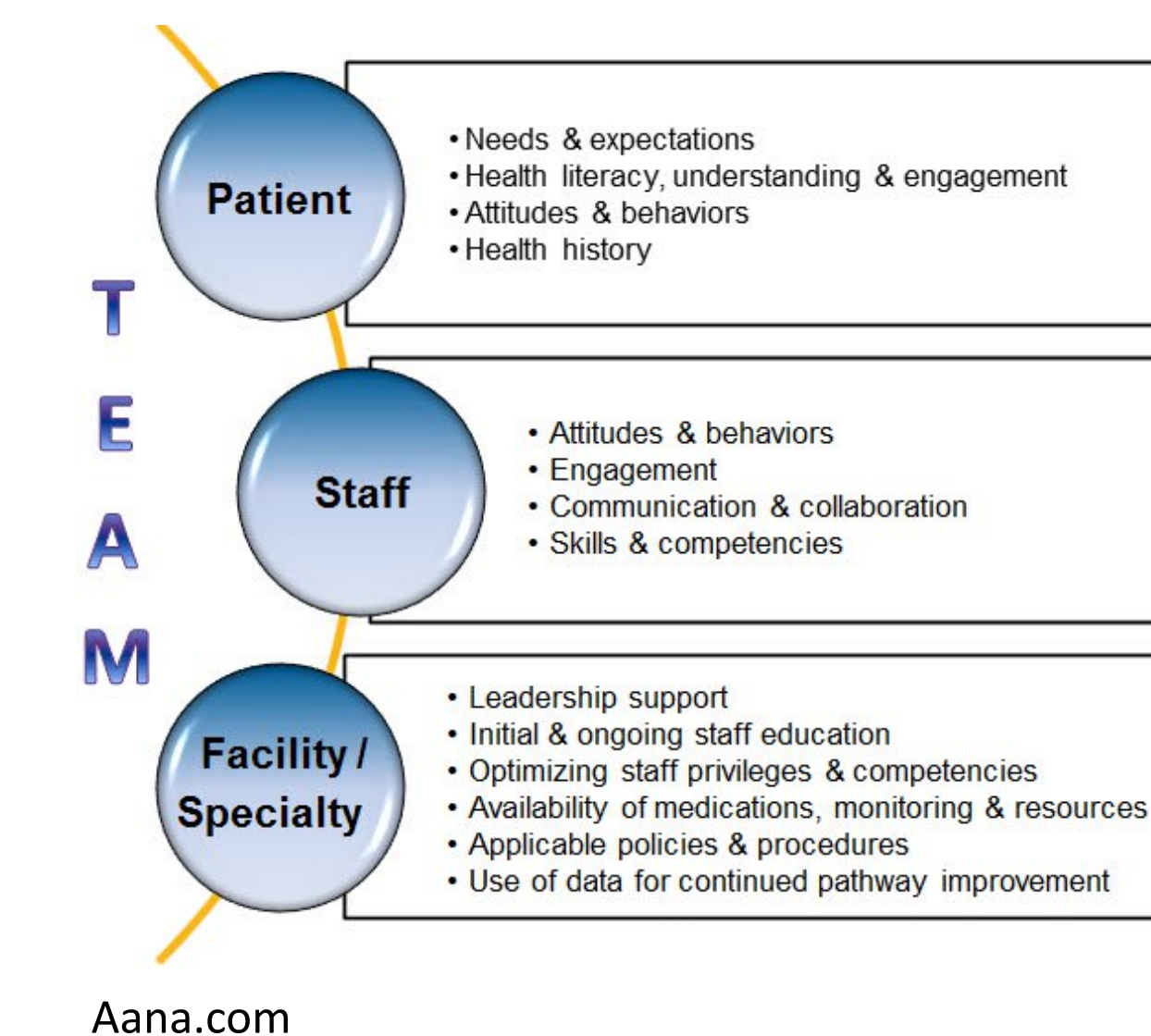
Cal Poly
Humboldt.

Key Players

Patient population: Patients undergoing inpatient surgical procedures

Surgical Team: Surgeon pre counsels patient and will create action plan, anesthesia will cooperate with surgeon and patient to administer pre surgery analgesics that will decrease post operative pain

Patient participation is key to successful implementation of ERAS, patient education by the healthcare team on post surgical care improves patient compliance



Evaluation

Outcome Evaluation: Average length of hospital stay, 30 day readmission rate, rate of prescription of narcotics on discharge

Process evaluations: Number of patients who received pre counseling, participation in ERAS program from pre-operative stage to discharge

Impact evaluations: Program completion and compliance, discharge within 5 days post op with no serious post op complications.

References

Aana.com. Retrieved April 19, 2023, from <https://www.aana.com/practice/clinical-practice-resources/enhanced-recovery-after-surgery>

Basics of Enhanced Recovery. UNC School of Medicine. (n.d.). Retrieved April 21, 2023, from <https://www.med.unc.edu/anesthesiology/enhancedrecovery/overview/components-of-enhanced-recovery/>

Graffigna, G., & Barelo, S. (2018, January 5). Patient health engagement (PHE) model in Enhanced recovery after surgery (eras): Monitoring patients' engagement and Psychological Resilience in Minimally Invasive Thoracic surgery. Journal of Thoracic Disease. Retrieved April 7, 2023, from <https://jtd.amegroups.com/article/view/18196/html>

Integrated Care Stories: Enhanced Recovery After Surgery. Kaiser Permanente Institute for Health Policy. (2023, February 10). Retrieved April 20, 2023, from <https://www.kpihp.org/integrated-care-stories/enhanced-recovery-after-surgery/>