Communication of Key Perioperative Data on the Neurosurgery Service

Seunggu J. Han, M.D., John D. Rolston, M.D., Ph.D., Rajiv Saigal, M.D., Ph.D., Nathan C. Rowland, M.D., Ph.D., Catherine Y. Lau, M.D., Michael W. McDermott, M.D. Department of Neurological Surgery

The Problem

The transition from an operative to postoperative setting is critical and involves transitioning care between multiple providers. Efficient communication is crucial for patient safety. There is therefore a need for a standardized, easily accessible documentation from the surgical team to postsurgical providers (e.g., RNs, other physicians).

Project Goal

We set a target 85% completion rate for brief operative notes. These must be completed within 30 min of leaving the inpatient PACU or within 30 min of arriving to the ICU. These notes includes all required elements of the APeX brief operative note template, as well as documentation of communication with the receiving nurse.

Project Plan

All neurosurgery residents were educated regarding the key items included in the brief op note, and instructed to not only document a full brief op note but that key items had been communicated to the bedside RN. The brief op note template was modified to include the exact procedure performed, including laterality, as well as to document direct communication with nursing, both of which were omitted from the default APeX template.

Results / Progress to Date

Sample Brief Op Note

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Right frontal craniotomy for tumor resection</th>
<th>W/ impact monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosis</td>
<td>Brain tumor</td>
<td>W/ neurophysiological monitoring</td>
</tr>
<tr>
<td>Findings</td>
<td>Large frontotemporal lesion, strip electrodes used for mapping, all signals intact after resection</td>
<td></td>
</tr>
<tr>
<td>Fluids</td>
<td>2.5 L</td>
<td></td>
</tr>
<tr>
<td>Blood Loss</td>
<td>100 cc</td>
<td></td>
</tr>
</tbody>
</table>

First quarter results are unavailable due to lag time of APeX report generation. Future reports will include full prospective and retrospective data.

Lessons Learned / Moving Forward

- We are continuing to improve the template (e.g. requiring manual entry of exact procedure performed)
- We are surveying ICU nursing and residents in our post-intervention period, to help determine our intervention’s effectiveness
- Incoming residents will be continually educated about the importance of brief op notes