Implementation of Standardized Discharge Instructions in Otolaryngology – Head and Neck Surgery Patients

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The Problem

- Press Ganey and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Surveys were reviewed by OHNS QI leadership. For 2012 – 2013 the UCSF Department of Otolaryngology ranked:
  1) In the 21st percentile nationally amongst our peer group for overall satisfaction on all discharge Information metrics.
  2) In the 7th percentile nationally specifically for patient satisfaction with information given regarding symptoms/problems to look for.
• This raised our awareness of the importance of explicit discharge instructions for post-op patients.
- Last year our QI project was to provide thyroidectomy/parathyroidectomy patients with surgery specific discharge instructions and this small subset of patients was pleased with these discharge instructions.
• However, the remainder of our patients still received generic discharge instructions that required de-novo creation for each patient by the resident at the time of discharge.
• This resulted in inconsistency in the information included, inefficient work-flow and occasionally omission of critical details regarding post-operative home self care.

Project Goal

- OHNS Residents will provide surgery specific discharge instructions for post-operative patients discharged at Mt. Zion Medical Center.
- Our goal was 85% compliance in providing patients with these discharge instructions, and this goal will be met for 3 out of 4 best performing quarters between July 1 2013 and June 30 2014.

Project Plan

1) Standardized discharge instructions were developed for each surgical procedure performed routinely.
2) Smart Phrases were created in Apex and shared with all OHNS residents (see example below)
3) Utilization of phrases was tracked quarterly based on an audit of After Visit Summaries (AVS) for each patient

Endoscopic Sinus Surgery

Discharge Instructions

Prepared for: [NAME]
Procedure: [ADMIT PROC]
Procedure Date: [ADMIT DATE]

You just underwent an Endoscopic Sinus Surgery. Please refer to these discharge instructions for information regarding care after your surgery.

Activity
- Please refrain from any heavy lifting or strenuous activity for a period of 14 days. You should not lift anything heavier than a gallon of milk.
- Please avoid blowing nose for a period of 14 days.
- You may resume the regular diet that you were eating prior to your surgery

Bathing

You may shower anytime.

Nasal Care with Saline Rinses

- You must start using Nasal Saline Rinses (salt water rinses) starting tomorrow to keep the inside of your nose clean, which will improve healing, decrease crusting in your nose, and prevent future sinus infections.
- Rinse your nose at least 2-3 times each day with approximately 240 milliliters of salt water to each nostril. Salt water rinse bottles and saline packets can be purchased as an over-the-counter medication at any pharmacy (a popular brand name is NeilMed Sinus rinse).

Medications:

1. You will be given a prescription for pain medicine. Every patient has a different pain threshold. Don’t hesitate to take the pain medicine if you are hurting, but take it exactly as directed on the prescription. Some patients have less pain than others and may only need over the counter Tylenol for pain. Do not take Tylenol in combination with the prescribed pain medication, but you can substitute on for the other.

Prescription pain medications can have some side effects:
- Do not drive or operate machinery while taking prescription pain medications
- Nausea/Vomiting: Try taking your pain medication with food.
- Constipation: Try over the counter fiber supplements or mild laxatives (ask your pharmacist for help.

2. Many patients are prescribed a steroid medication called Prednisone to take in a tapered fashion in the days leading up to surgery. If you have been prescribed this medication please continue to take it and taper down the dose as prescribed by your surgeon. You should finish this medication a little over a week after surgery.

3. You may have been prescribed anti-biotics to take leading up to your surgery, and this medication is typically continued for approximately a week after surgery. If you were prescribed anti-biotics prior to surgery please continue taking these as prescribed by your doctor.

4. It is ok to start your other regular prescription medications the day after surgery unless you have been told to stop them by your Doctor. Exceptions to this are blood-thinning medications including Aspirin, NSAIDs such as Ibuprofen, and Coumadin. You should not start taking the medications for 1 week because they increase the risk of bleeding from your nose. Please speak to Dr. [ATTROPV] or the Practice Assistant if you would like to start these medications earlier than 1 week after surgery.

Call your doctor if:

1) Some amount of bloody drainage and oozing is expected following this type of surgery. Call Dr. [ATTROPV]’s office if you have continuous bleeding that does not stop with pressure for 15 minutes on the tip of your nose, or slow bleeding that lasts more than 24 hours.

2. It is normal to have a low fever for the first 24 to 48 hours after surgery. Call Dr. [ATTROPV]’s office or go to the emergency room if you have a fever > 100.4 Degrees Fahrenheit that lasts longer than this first 24 to 48 hours, if you have a high fever, or if your fever is associated with any other concerning symptoms.

Concerning Symptoms

Should you develop changes in your vision or blindness, chest pain, shortness of breath, trouble breathing, or any other concerning symptoms, please go to your closest Emergency Department and notify Dr. [ATTROPV]’s office.

Follow Up Appointment

Dr. [ATTROPV]’s Office
Date/Time: [DATE]
Address: 2380 Sutter Street, 3rd Floor.
Number: 415-353-2757

Your booked appointments are listed above. If no appointment is listed, a representative from our office should call with an appointment date & time. However, if you have not received notification of an appointment within 4 days of discharge, please call [ATTROPV]’s office to schedule a follow-up appointment with [ATTROPV] within 2-4 weeks of your procedure.

We would also recommend notifying your Primary Care Physician of your recent procedure and hospitalization in order to close the loop on your care.

Figure 1: Sample Apex smart phrase for Sinus Surgery procedure.

Results/Progress to Date

- Press Ganey Results
  - Following the implementation of standardized OHNS discharge instructions mean satisfaction with Press Ganey item “Instructions for Care at home” increased from: 86.8 % (N = 155 patient surveys) in 2012-2013 to 90.2 % (N = 107 patient surveys) in 2013-2014.

Lessons Learned

- Utilization of standardized templates eliminates variability of d/c instructions among different resident providers
- Standardized discharge instruction templates can be easily integrated into resident workflow, and anecdotally actually increase efficiency.
- Compliance with utilization of templates was excellent, but decreased over time, likely secondary to decrease in frequency of reminders from QI Champions, as well as non-OHNS interns rotating onto service who were less familiar with these templates.

Moving Forward

- Roll out standardized discharge instruction templates to all OHNS operative patients at all hospitals
- Apex “build” by IT so that hard stops can be input into templates to further increase efficiency and ease of use (‘F2’ through document and click drop down menus)
- Collect data on effect of standardized instructions: ie – Patient surveys, analysis of # of office phone calls and or post-hospitalization complications/re-admissions before versus after implementation of this project