

# Proper Prep Prevents Poor Performance

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When it comes to prepping patients for surgery, no two hospitals are alike.



One facility may employ mostly manual processes and integrate them seamlessly with a few automated processes. Another facility may have more automated preop processes, but they aren't properly integrated with those manual processes the hospital still uses. Whatever the case, some facilities are simply more efficient and effective at prepping patients for surgery and tracking pre-op processes. In turn, this also means some are more readily able to avoid potentially devastating errors and increase patient safety.

While the staff at many hospitals may be comfortable and familiar with using manual processes prior to surgery, there may be safer, more cost-effective options that leverage software systems.

"The busier the environment, the tougher it is to track all these steps using a manual process," says Joe Smith, Vice-President of Perioperative Strategy, Picis. "With properly designed and implemented technology, hospitals, surgeons, and anesthesia providers can save time and money while improving patient safety using (several) techniques."

### **A Lot To Consider**

A lot needs to be accomplished prior to the surgical procedure taking place. A patient history and physical must be completed and documented. The correct diagnostic tests need to be ordered, and the results of those tests must be reviewed by both the surgeon and the anesthesia provider. Then there is the patient. He or she must be informed about the prepping process and give consent for surgery and

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anesthesia. The patient must also be informed about his or her role in the prepping process. These tasks must be done properly, and that takes time.

“Many hospitals can accurately complete the pre-op process using manual processes, but the manual approach will lack the efficiencies an automated approach can provide,” says Smith. “An automated process will clearly save time at every hospital, reduce day-of-surgery cancellations, and at most hospitals will improve the accuracy of the process as well.”

### **Efficient Data Collection**

It all starts with more efficient data collection. The data collected at the surgeon’s office can be integrated with hospital software that is used for the patient history and physical. Since surgeons are utilizing electronic medical records, this integration is now a viable option. Deployment of the patient portal can also allow the patient to view and correct data in his or her personal health record.

According to Smith, very few hospitals have deployed clinical decision support to generate diagnostic testing recommendations and patient-specific teaching instructions based on the data collected. Others lack an automated pre-op checklist capability that uses dashboards to monitor all steps in the pre-op process for each individual case.

### **Invest And Implement**

However, it doesn’t have to be this way. The investment and implementation of the right technology, coupled with some measures taken by staff members, can lead to better, more cost-effective pre-op processes being deployed by hospital facilities.

When it comes to diagnostic testing, a common practice has been to order the same battery of tests for all patients. Obviously, this is both unnecessary and inefficient. Furthermore, it could lead to a required test being missed, the cancellation of a surgical procedure, and added cost to the hospital.

The implementation of software, such as preoperative clinical decision support solutions offered by Picis, can help hospitals avoid some of these issues. First and foremost, it enables the documentation of patient co-morbidities. It can also generate personalized pre-op instructions based on both the patient’s scheduled surgery and his or her medical history, which helps save time.

Software can also integrate the scheduling software and surgical authorization software, as well as allow clinicians to maintain automated checklists and easily monitor the pre-op process using intuitive dashboards.

“This prevents key steps from falling through the cracks and helps avoid costly cancellations and delays,” Smith adds.

### **Improvement Takes Time**

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So how can hospitals improve their ability to monitor pre-op checklists and collect data?

According to Smith, considering the purchase and implementation of web-based pre-op solutions is a good place to start.

These solutions are designed to directly address patient safety issues by consolidating preop information and providing clinical decision support,. They are also designed to help personnel avoid confusion and errors, as well as increase efficiency.

“These components provide a number of features to assist surgeons, anesthesia providers, and hospitals automate the pre-op process,” says Smith.

For example, some solutions on the market feature a patient portal and advanced integration that combines to streamline the data collection process and integrate the data into the patient’s history. Critical data is also pulled from the surgeon’s EMR, and a secure portal allows the patient to log in and update critical information, as well as access pre-op instructions.

Furthermore, automated checklists can be maintained and monitored via an intuitive dashboard feature.

Again, every hospital is different. However, Smith points out that the processes many facilities have in place could stand to improve.

“While many hospitals have taken steps to automate this process, a vast majority still use a manual process for one or more of these steps,” he says.

“This by default means the overall workflow will likely be manual as well,” Smith adds.

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