

## BACKGROUND INFORMATION

- Communication of clinically relevant information between members of the perioperative team provides fundamental groundwork for safe patient care
- Effective information sharing between perioperative team members fosters the development of shared mental models, allowing team members to have a common understanding of the situation, the treatment plan, and the roles of each member of the team
- In this scenario, effective communication will be defined as a two-way process in which one team member sends information that is heard and understood by the receiving party or parties
- The term “huddle” is used to identify a multidisciplinary preoperative briefing
- The three disciplines involved in huddle will be Nursing, Surgery, Anesthesia

## PURPOSE

- To improve preparedness of perioperative nurses through an established effective communication tool
- Pre and postoperative survey will be used
  - Data will be collected to determine effectiveness of proposed preoperative briefing framework

## STUDY QUESTIONS

1. Will a multidisciplinary preoperative briefing affect the preparedness of Perioperative Nurses?
2. Does the preparedness of perioperative nurses decrease occurrence of adverse events?
3. Does a multidisciplinary preoperative briefing promote the development of a shared decision making model?

## STUDY DESIGN DESCRIPTION

- Longitudinal quantitative survey

## DISCUSSION

- Inadequate communication in the perioperative area has been identified as the most common behavioral factor contributing to adverse events such as retained surgical items (RSI), wrong site surgery, wrong procedure, or wrong implant
- The development of a tool to cultivate effective communication that may lead to a common understanding of a situation, increase the preparedness of perioperative nurses, and decrease adverse events

## IMPLEMENTATION

- Create pre & postoperative surveys for each involved discipline to evaluate preparedness of perioperative nurses
- Provide background information to three disciplines involved in preoperative care of patients: Nursing, Surgery, Anesthesia
- Identify surgical specialties to trial proposed huddle tool
- Use data from surveys to measure the effectiveness of preparedness of perioperative nurses
- Collect data pre- & post-implementation of proposed huddle tool to measure the impact on adverse event occurrence

## REFERENCES

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2. Cumin, D., Skilton, C., & Weller, J. (2016). Information transfer in multidisciplinary operating room teams: a simulation-based observational study. *BMJ Quality & Safety*, 26(3), 209–216. <https://doi.org/10.1136/bmjqs-2015-005130>
3. Quinn, T. D., Wolczynski, P., Sroka, R., & Urman, R. D. (2018). Creating a Pathway for Multidisciplinary Shared Decision-Making to Improve Communication During Preoperative Assessment. *Anesthesiology Clinics*, 36(4), 653–662. <https://doi.org/10.1016/j.anclin.2018.07.011>

## PROPOSED HUDDLE TOOL

- ☐ Two-person patient verification
- ☐ Procedure verified
  - Site \_\_\_\_\_
  - Laterality (if applicable) \_\_\_\_\_
  - Level (if applicable) \_\_\_\_\_
- ☐ Site marked (if applicable)
- ☐ Position \_\_\_\_\_
- ☐ Anticipated length of case \_\_\_\_\_
- ☐ Consents Verified
- ☐ H&P verified
- ☐ 24-hour update
- ☐ Allergies \_\_\_\_\_
- ☐ Antibiotics \_\_\_\_\_
- ☐ VTE Prophylaxis
- ☐ HCG Results
- ☐ Difficult airway concern?
- ☐ Risk of blood loss? \_\_\_\_\_ Blood bank sample? \_\_\_\_\_
- ☐ Imaging, implants, equipment available \_\_\_\_\_
- ☐ Post-op destination \_\_\_\_\_
- ☐ Any other concerns?

