

Hatch a Life: Just In Time for a Miracle!

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BACKGROUND

The success rate of In Vitro Fertilization (IVF) treatment depends on timely monitoring and smooth care transitions throughout the entire IVF process by multidisciplinary teams consisting of physicians, nurses, operating room technicians, embryologists, andrologists, and ancillary staff. Currently in IVF unit fragmented care and miscommunication among healthcare professionals led to patient safety concerns, decreased patient satisfaction, and staff burnout.

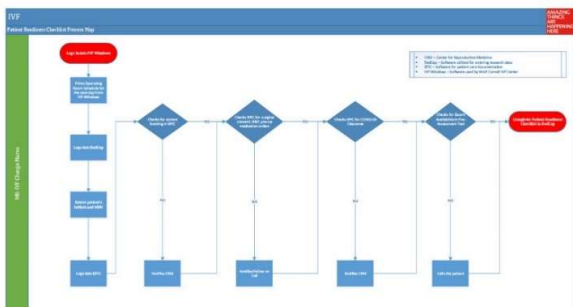
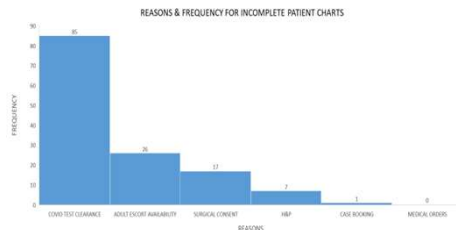
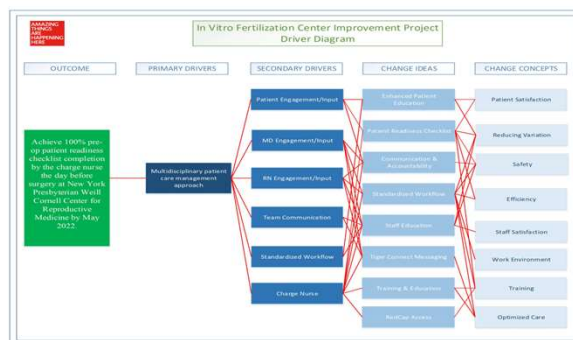
OBJECTIVE

The project aim is to have 100% compliance of the pre-op Patient Readiness Checklist (PRC) by May 2022. The PRC is administered by the charge nurse after the Pre-Op visit the day before surgery starting at 07:30 a.m. at the In Vitro Fertilization Center at NewYork-Presbyterian/Weill Cornell Medicine. The PRC includes surgical consent, H&P, medical orders (pre-op and post-op) for the day of the surgery, COVID test clearance, adult escort availability, and correct EPIC booking of the case (booked under correct surgeon). Missing components are addressed by the same charge nurse immediately via email, Tiger Connect communication system, in person, or a phone call.

METHOD

The PRC was developed in REDCap, an online platform to assist the charge nurse in making sure all aspects of patient readiness are completed the day before surgery. "Patient readiness" was defined as completion of surgical consent, H&P, COVID test clearance, medical orders, adult escort availability, and correct case booking in EPIC. The charge nurse used the schedule list for the operating room to go over each patient's chart and entered the data in REDCap. Any missing components were addressed after all charts were checked for the day and followed up until the chart was considered complete.

398 EPIC charts were reviewed by the same charge nurse between January 24, 2022 and March 3, 2022 starting at 07:30 a.m. on the day of the Pre-Op Visit (the day prior to the procedure).



FINDINGS

- Of 398 charts reviewed, 109 (27%) were missing at least one element of the PRC.
- COVID test clearance (78%, 85/109) was the major contributor for incomplete PRC.
- Lack of adult escort availability after the surgery was the second major contributor (24%, 26/109).
- Medical orders which include pre-op and post-op phases of care were 100% complete.

DISCUSSION

Pre-op Patient Readiness Checklist helped identify areas leading to potential delays in IVF care. Checking patient charts the day before surgery gave an opportunity to address and correct any outstanding issues, prevented procedure delays or case cancellations, and allowed for a better workflow the day of the procedure.

Since absence of pre-op COVID testing was found to be the main contributor for an incomplete PRC, an emphasis was made by the team to address this component. Multiple meetings took place with leadership to identify the reasons for lack of COVID test clearance. There were several factors found and a plan was created to address them – patients would receive a COVID test 2-5 days before their scheduled procedure instead of the day before surgery.

To address the lack of an adult escort availability after surgery, we conducted an in-service for the nursing staff to learn about available paid escort services and flyers were provided with company information to patients as an alternative option. Additionally, we worked with the EPIC team to create an Adult Escort tab in the Pre-op Visit navigation window. This is now part of the workflow, which ensures that an escort is verified and documented.

CONCLUSIONS and NEXT STEPS

The pre-op Patient Readiness Checklist has been implemented as the standard patient screening process and is an ongoing effort to proactively identify problem areas to address them at the root cause.

