Implementing Same Day Arthroplasty Surgery in a Community Hospital

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Background
• Joint replacement surgery:
  • Single most expensive procedure covered by Medicare
  • Annual volumes expected to increase.
  • Historically patients were admitted to the hospital for post surgery recovery.
• Review of literature reveals:
  • Inconsistent and unclear definitions for “same day” vs “24 hour” surgery.
  • Post-op complications between inpatient and outpatient groups are not significantly different.
  • In 2018, CMS removed the total knee arthroplasty from the ‘inpatient only’ list, requiring a re-examination of the care pathway.

Purpose
• To establish a Same Day Arthroplasty Program in a 172-bed community hospital.
• Increased patient census and surgical volume necessitated the need to explore alternative care models.
• There were no identified same day joint centers in the Greater Boston area.
• Facility did not have approved designated Extended Recovery unit.

Process
Utilization of a multi-disciplinary team that met bimonthly to identify, implement, and evaluate each stage of the process.

Key stakeholders included:
• Nursing (RNs and Case Management)
• Advance Practice Providers (APRNs and PAs)
• Physical and Occupation Therapy
• Surgeon/Anesthesia
• Project Manager
• Admitting (bed flow)
• Heads of each department (CPE, PACU, etc.)
• IT support

Outcomes
• Data collected from August 2018-August 2019
• Identified candidates and successful discharges on same day from floor or PACU.
• Common reasons for inability to discharge:
  • Delayed resolution of spinal anesthesia
  • Hypotension
  • Other medical issues
  • Ability to transition from discharge from med-surg unit same day to discharge from PACU same day thus increase availability of inpatient beds.
• Within 1st year of implementation there was only 1 readmission within 30/60/90 days.

Next Steps
• Develop a standardized process for all surgeons to follow
• Development and implementation of a formal hydration protocol to reduce hypotension/hypovolemia.
• Establish a required pre-op joint class to improve patient readiness.
• Improved electronic communication and for identification of same day discharges.
• Transition total knee arthroplasty to same day surgery pathway.
• Serve as model and support for other surgical services exploring same day surgery pathways.

Implications for nurse practitioners (NPs)
• APPs play a key role in the admission and discharge process for surgical same day patients.
• Collaboration with the entire interdisciplinary team is essential to the success of any care redesign.
• Key lessons learned from this initiative are used to redesign care pathways for other surgical procedures.

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