Pathway to Success! Implementing a Clinical Pathway to Improve SICU CABG Outcomes

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Background

- Prolonged stay in the Intensive Care Unit (ICU) is associated with high mortality, morbidity, and costs, with respiratory problems as the leading complication.
- The Society of Thoracic Surgeons (STS) is a national reporting database that benchmarks South Miami Hospital (SMH) Critical Care on the following indicators:
  - ICU length of stay (LOS) <48 hours
  - Ventilator Time <6 hours.
- ICU CABG Length of stay in 2011 was 75 hours.
- Median Ventilator time was 4.8 hours.
- This prompted a need to develop a guideline for all disciplines involved in the care which lead to improvements in patient care, utilization of resources and outcomes.

Goals

- Develop and implement an evidence-based post cardiac surgery clinical pathway to improve coordination of care, utilization of resources and patient outcomes.
- Successful outcomes are defined as:
  - CABG ICU LOS <48 hours
  - CABG Ventilator Time < 6 hours with an internal stretch goal of <4 hours.

Key Stakeholders

- Critical Care Department
- Respiratory Therapy Department
- Pharmacy Department
- Baptist Health Cardiac & Thoracic Surgical Group
- SMH CT Surgery Taskforce Committee Members
- Physical Therapy Department
- Cardiac Rehabilitation Department
- Dietary Department

Methods

- Establish an interdisciplinatory team of surgeons, ARNPs, pharmacists, nurses, rehabilitation specialists and respiratory therapists.
- Set clear daily goals from immediate post-operative time until discharge.
- Develop a Cardiac Surgery Clinical Pathways.
- Designate a dedicated step-down area for post open heart patients.
- Designate CCU as the step-down unit for post open heart patients.
- Educate the Critical Care Staff on pathways.
- Educate the Critical Care Nurses on care of the post open heart patient in the ICU and step-down unit.
- Create a clinical dashboard to trend patient data and outcomes.
- Monitor compliance with utilization of Clinical Pathway via daily chart audits by leadership team.
- Assess patient tolerance and adherence to the pathway daily with the Critical Care team during Interdisciplinary Rounds.
- Discuss unit progress and outcomes monthly at the SMH Cardiac Surgery Taskforce meeting.
- Utilizing the SICU Cardiac Surgery Clinical Pathway on CABG patients led to positive patient outcomes by eliminating variations in care.
- Based on this success, it was decided that other Cardiac Surgery patients would benefit from the pathway and the population was extended to include Valves and Combined CABG/Valve Procedures.

Society of Thoracic Surgeons (STS) Adult Cardiac Surgery Database Isolated CABG ICU Data

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