Peri-operative Management Team
Enhance Surgical Outcomes

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Traditional Surgeons’ Rounds
Where are the nurses?
Peri-operative Management Team

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What they are looking for?
Doctors Orders

Peri-operative Management Team

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Traditional Surgeons’ Round

- Decision mainly made by Surgeon-in-charge
- Nurses missed the round
- Two Rounds / Day (Missing the golden 3 hours of treatment)
- Communication among discipline by paper documentations only
- Case understanding decreased
Traditional Surgeons’ Round

- Ineffective
- Unable to reflect the real condition
- Delay response
- Practice discrepancy between wards
Peri-operative Management Team

PMT
Cultural Change

- **Change** patient: effort in post operative care
- **Change** nurse: Don’t feel shy, Voice out, report problems and queries ASAP
- **Change** doctor, Respect others opinions, be open, aware any soft sign
- **Change** Allied Health Staff: Not “Allied”, work as a team, important team member in Peri-operative care
PMT (since 2012)

- Multi-disciplinary approach
  - Surgeons
  - Nurses
  - Physiotherapists
- One common goal
  - Target group of patient
  - Breaking up the ward boundary
  - Streamline the treatment plan
APN (QI) + Consultant-in-charge
Extra Daily ward round for patient undergoing Ultra-Major Surgery in Department
Extra ward round

• Maintain same standard of practice among ward
• Report by APN(QI)
  – Clinical Assessment of Patient
  – Close and frequent monitoring
  – Early detection of problem
  – Rapid response
    • Avoid delay till late hours OT or Interventional Radiology

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Focus

Intake and Output

Trend of Vital Signs

Wound Care

Lab Results

Pain Level

Peri-operative Management Team

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Perioperative Physiotherapy Management

- Early Mobilization
- Prevention of Chest Complication
- Prevention of DVT
- Education
Good Job!

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Peri-operative Management Team
Peri-operative Management Team
Tseung Kwan O Hospital
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Our Target
Nurse education

Cultural change of practice

Early detection of life threatening complication

Efforts Alignment
- Haemodynamic states
- Respiratory Care
- Nutrition
- Mobilization

Break down the ward boundary

Service Co-ordination

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Department of Surgery
Peri-operative Management Team
Risk adjusted 30 days mortality, Emergency Surgery, SOMIP

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Risk Adjusted 30 Days mortality rate on emergency surgery
The biggest room in the world, is the room for improvement.

(Anonymous)
It Never Ends.
The way ahead
Way ahead

• Elective Surgery
• Pre-operative assessment
  – Ambulatory Care
• Emergency OT Optimization
I will now recap.......
PMT makes Cultural Change

- Changed patients
- Changed nurses
- Changed doctors
- Changed Allied Health Staff
做得手術就無理由預期病人一個月內會死！

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THANK YOU