Pre-Post Operative Patient Education

Postoperative complications are the most significant independent risk factor leading to 30-day hospital readmissions among general surgery patients according to a 2012 study published in the Journal of the American College of Surgeons. With proper planning, patient education, and timely follow-up in the office, some postoperative complications may be prevented.

The educational process begins in the preoperative phase with the informed consent discussion and the written preoperative instructions. Included in this discussion are:

- signs and symptoms of the common known complications
- complications that are possibly less common but are serious and would warrant quick identification and intervention
- a description of what to expect during the surgical stay and the post-procedure recovery period

Document the discussion of potential complications in the patient medical record. Patients are at a greater risk for postoperative complications in the immediate postoperative time period. A study of Medicare fee-for-service patient medical records revealed that nearly one in seven patients had potentially preventable adverse events that required hospital admission within a month following their procedure. It is important that when the patient leaves the surgical facility or is discharged home from the hospital following a surgical procedure, that the patient/caregiver receive repeat written, and individualized instructions concerning signs and symptoms of possible surgical complications. It is also important that patients know how to contact the surgeon, and the importance of the follow-up visit. Timely post-procedure follow-up in the office provides an opportunity to assess the patient for potential complications, and reinforce the education about signs and symptoms of possible complications.

Comprehensive post-operative instructions for follow-up care include these signs and symptoms, at a minimum:

1. Difficulty breathing
2. Fever over 100 degrees
3. Difficulty or painful urination, inability to empty bladder
4. Black, tar-like stools
5. Jaundice (yellow tint to eyes or skin)
6. Pain that sharply increases, or becomes uncontrollable
7. Wound drainage problems; redness, foul odor from drainage, bleeding or opening at the incision site
8. A decrease in ability to function (ex: cannot walk)
9. A change in level of consciousness or ability to wake
10. Persistent diarrhea, constipation, nausea, or vomiting
11. Inability to tolerate food or drink
12. Unexplained leg pain in one or both legs
13. Difficulty swallowing
14. Call 911 in an emergency

Ask the patient/caregiver to sign an acknowledgement that they have received written postoperative instructions, and place a copy in the medical record. In order to facilitate postoperative care, a copy of the patient instructions should be sent to the surgeon’s office medical record.

The National Patient Safety Foundation (NPSF) publishes four post-discharge tools for patients. Providers may copy and provide to patients. These may be found at www.npsf.org/for-patients-consumers.

MagMutual Risk Management and Patient Safety Consultants invite our policyholders’ questions. If you wish to
discuss issues related to this article, or have other questions please call us at 1-800-282-4882, and ask for Risk Management.

Related topics: Coordination of Care, NPSG

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