



Knowledge and Compassion Focused on You

MedStar-Georgetown Surgical Outcomes Research Center

Evaluating Variability in the Implementation of Surgical Time-Outs

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2016 Disclosure Slide

Sam Lawrence

Nothing to disclose

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Background/Methods

- Communication in the OR reduces adverse patient outcomes
- OR time-outs increase safety protocol adherence

Tool

- Data collection
 - May to July 2015
 - 5 independent and unannounced auditors
 - **111 TOs**: 50 elective cases, 24 surgeons, 7 subspecialties



3

Department	Service 1	Service 2	Service 3	Service 4	Service 5	Service 6	Service 7
Procedure	100%	100%	100%	100%	100%	100%	100%
Team member names	77%	100%	82%	25%	0%	33%	13%
Team member roles	77%	100%	82%	25%	0%	33%	13%
Expectations for assertiveness	0%	33%	18%	100%	0%	33%	0%
			Surgical				
Name	100%	100%	100%	100%	100%	100%	100%
DOB	100%	100%	100%	100%	100%	100%	100%
MRN	100%	100%	100%	100%	100%	100%	100%
Procedure	100%	100%	100%	100%	100%	100%	100%
Positioning	100%	100%	91%	100%	100%	100%	100%
Difficulties	92%	100%	91%	100%	100%	100%	25%
Allergies	100%	100%	100%	100%	100%	100%	50%
Consent	100%	100%	91%	50%	100%	100%	50%
Blood loss	92%	100%	100%	25%	88%	100%	13%
Blood/fluid availability	92%	100%	100%	100%	75%	100%	25%
Operature Fields	69%	67%	91%	100%	25%	100%	88%
ABX	100%	100%	100%	75%	100%	100%	100%
DVT prophylaxis	100%	100%	100%	25%	100%	100%	100%
Normothermia	100%	100%	100%	50%	75%	100%	88%
Beta blockers	100%	100%	100%	100%	100%	100%	88%
Radiology	50%	100%	100%	100%	63%	67%	100%
Fire risk	62%	100%	27%	25%	75%	67%	13%
Special considerations	85%	100%	82%	75%	25%	33%	25%
Questions or concerns	92%	100%	91%	100%	88%	67%	25%
Checklist documented	100%	100%	100%	100%	88%	100%	100%
% completed	87%	96%	89%	78%	75%	85%	63%
			Debriefin	9			
Verbal debriefing	100%	100%	100%	33%	80%	0%	17%
Procedure	100%	100%	100%	33%	80%	0%	83%
Counts reconciled	100%	100%	100%	100%	80%	100%	33%
Specimen reconciled	100%	100%	100%	33%	80%	0%	33%
Equipment issues	100%	100%	100%	33%	80%	0%	17%
Patient recovery concerns	67%	100%	100%	0%	80%	0%	17%
Airway concerns	100%	100%	100%	33%	80%	0%	17%
Blood loss	100%	100%	100%	33%	80%	0%	17%
Hemodynamic stability	100%	100%	100%	33%	80%	0%	17%
Specific order	67%	100%	100%	0%	80%	0%	17%
% completed	93%	100%	100%	33%	80%	10%	27%



Limitations and Strengths

Limitations

- Non-uniform representation of certain subspecialties
- Non-100% capture across TO process
- Strengths
 - >100 multi-subspecialty, multi-surgeon perioperative tool
 - Independent and unannounced auditors



Conclusions and Next Steps

- Wide variation in protocol adherence
- Feedback to subspecialties
- Educational protocol



6