

Inclusion of Anesthesia Resources in Interventional Pulmonology

The Problem

We embarked on this project to increase safety and outcome quality for patients requiring sedation for procedures in the Interventional Pulmonology suite. Commonly, large doses of sedation (e.g. >5 mg of Midazolam) were used, which results in prolonged recovery times and may lead to intraprocedure O₂ desaturation. In addition, many of the procedures lasted far longer than the airway local anesthetic topicalization applied by the Pulmonologist which meant that the patient might experience significant pain and move at a critical point in the procedure. Hence, it was decided that Anesthesia services should be used to facilitate these procedures.

Aim/Goal

By incorporating Anesthesia resources in the Pulmonology laboratory, Pulmonologists may safely perform more complex procedures under general anesthesia. Primary metrics for this project include a decreased number of patients requiring > 5 mg of midazolam. Secondary metrics include fewer patients requiring prolonged recovery times.

The Team

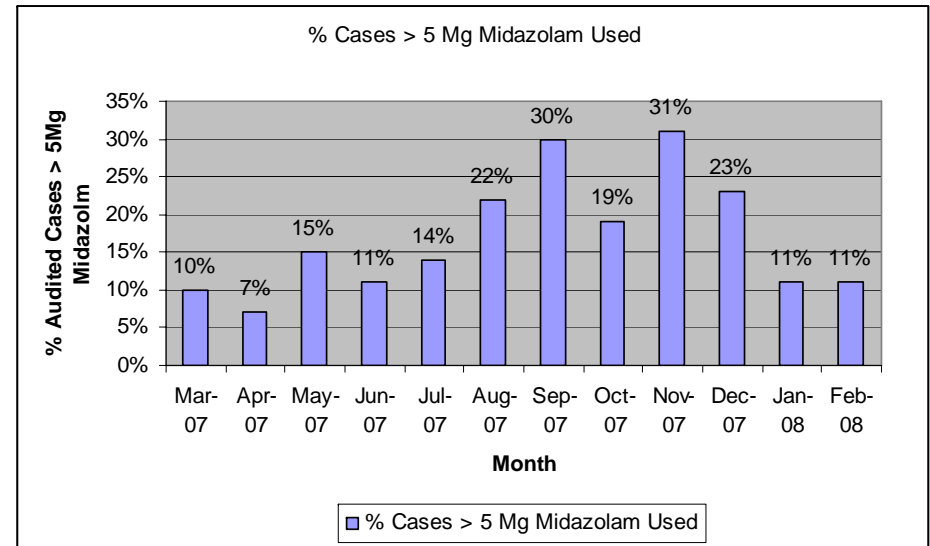
- Stephen A. Cohen MD - Director, Ambulatory Anesthesia
- Pete Panzica MD - Vice Chairman, Clinical Anesthesia
- Armin Ernst MD – Chief, Interventional Pulmonology
- Lorraine Grynuik RTT – Manager, Interventional Pulmonology
- Janelle Antosia – Practice Manager, Interventional Pulmonology
- Davin Janicki – Project Manager, Healthcare Quality PI
- Interventional Procedures Committee

The Interventions

- Additional Resource provided in Interventional Pulmonology so that long duration complex procedures could be performed with Anesthesia support.
- Information provided by Anesthesia department about how to recover deeply sedated patients within the Department of Interventional Pulmonology.

The Results/Progress to Date

Preimplementation rates of > 5 mg midazolam use among audited cases.



Next Steps/What Should Happen Next:

Ongoing data collection and analysis to be reviewed at monthly workgroup meetings.

Program launch: April 15th, 2008.



Beth Israel Deaconess
Medical Center



A teaching hospital of
Harvard Medical School

THE SILVERMAN INSTITUTE
For Healthcare Quality and Safety

For More Information Contact

Stephen A. Cohen, MD Director, Ambulatory Anesthesia

Davin Janicki, Project Manager, Healthcare Quality Process Improvement