Developing Clinical Pathway for Spine Surgery Patients

The Problem
- Spine surgery patients have specific clinical challenges including but not limited to high perioperative pain intensity, inactivity, blood clots, nausea/vomiting and complicated non-standardized pain treatment regimens prior to surgery.
- Standardized clinical pathway can assist in clinical decision-making, streamline care, reduce variation in practice and may improve clinical outcomes.
- Similar pathway exists for patients undergoing total joint surgery at BIDMC and for spine surgeries at other institutions.

Aim/Goal
- Initiate clinical pathway for spinal surgery patients in perioperative period
- Assess and modify pathway after implementation

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The Interventions
- Initially focus on improving assessment and treatment of perioperative pain and identify next steps when pain interferes with progress through pathway.
- Literature review on multimodal pain management pathway strategies.
- Total joint replacement treatment pathway used as benchmark in creating clinical pathway for spine surgical patients.

The Results/Progress to Date
- Completion of preliminary literature review supporting pathway use.
- Initiated multidisciplinary discussion among orthopedic surgeons, neurosurgeons, anesthesiologists and nursing services.
- Draft clinical pathway for surgical spine patients created (see excerpted table)

Lessons Learned
- Variation in provider to provider practice offers opportunity for quality improvement with pathway development.
- Multidisciplinary participation and development of a pain treatment pathway for patients receiving total joint replacements reduced variation and improved outcome.

Next Steps/What Should Happen Next
- Develop outreach strategies to achieve buy-in for pathway implementation and improvement among those necessary for its success: residents, fellows, staff, nursing and allied health teams (including physical therapists).
- Develop and trial performance measures for achieving and improving pathway outcomes.
- Use process and lessons learned for adaptation to other patient care situations.

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