The Problem
- Hysterectomy for benign conditions can safely be performed as an outpatient procedure for the majority of patients.
- Standardization of patient care through the use of clinical care pathways can assist in decreasing PACU length of stay (LOS) while maintaining or improving patient satisfaction scores.
- Care pathways have been successfully introduced to the urogynecology service at BIDMC.
- A major cause of discharge delay for gynecologic patients at BIDMC was a prolonged time to void.
- Multiple regimens for post-operative voiding trials created confusion and inconsistency for nursing and residents.

Aim/Goal
- Establish a clinical care pathway for benign, outpatient vaginal and laparoscopic hysterectomy with use of a standardized voiding trial.
- Decrease PACU LOS without decreasing patient satisfaction or increasing complications, unplanned outpatient visits or re-admission rate.
- Compare LOS before and after implementation. Assess causes of deviation from pathway and modify pathway as needed.

The Team
- Perioperative Nursing: Mary Ellis, RN, Susan Dorion, RN, MSN
- Anesthesiology: Jeffery Martel, MD, Cullen Jackson, PhD, Eswar Sundar MD
- Obstetrics and Gynecology: Syntia Guillame, Elise Porter MA, MBA, Annie Liu, MD Toni Golen MD, Celeste Royce MD, Tariro Mupombwa, MD
- PACU LOS Faculty Hour and Gynecology Leadership Committees

The Intervention
- Care Pathway introduced in March 2015 including:
  - Standardized pre-operative evaluation and counseling.
  - Pre-operative team huddles including patient and family.
  - Clinical guideline for perioperative care including pre-operative medications, fluids, and voiding trial.
- Clinical Care Pathway presented at departmental Grand Rounds in Chief Resident Quality Improvement Lecture Series.
- Care pathways completed and collected for all scheduled outpatient hysterectomies.
- Audit pathways to assess for adherence and direct future improvements.

The Results
- Cause of Delayed PACU Discharge
- Benign Hysterectomy Trends 2014-2015
- Lessons Learned
- Provider variation in practice persists in regard to voiding trials.
- Setting expectations for outpatient surgery is associated with a decrease in planned same day admission procedures, although this may increase the PACU length of stay and observations.
- Postoperative sedation, nausea and vomiting contribute to delayed PACU discharge.
- Outpatient hysterectomy and decreased PACU LOS are achievable goals for the majority of patients undergoing surgery for benign conditions.

Next Steps/What Should Happen Next
- Continue provider education to increase adherence to pathways.
- Monitor for use of individual pathway steps including voiding trial and pre-op huddle.
- Work with Anesthesiology to decrease sedation and PONV.