

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: V-134 POST-OPERATIVE TELEPHONE ASSESSMENT	POLICY #: 1248
	VERSION: 3
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DATE APPROVED: 09/06/2018	

PURPOSE: To describe the process, utilized by the Ambulatory Surgical Center (ASC), to evaluate patients' postoperative condition.

POLICY: Nursing staff will conduct postoperative telephone assessment of each patient; first telephone assessment will be conducted within 24 to 72 hours following a procedure and a second telephone assessment will be conducted within one week following the procedure, if indicated.

PROCEDURE:

Perioperative Holding Area (POHA) or Post Anesthesia Recovery Unit (PACU) nurse (the nurse) will do the following:

- A. Prior to discharge, inform the patient that a follow-up assessment via telephone call will be made. The nurse will obtain a phone number where the patient can be reached following discharge.
- B. Within 24-72 hours following surgery, the nurse will contact the patient or the care giver (if applicable) at the number provided, and:
 1. Ask all questions on the postoperative telephone assessment form and document all answers given by the patient or caregiver.
 2. Refer the patient to the appropriate High Desert Regional Health Center (HDRHC) Surgical Clinic or Urgent Care for early follow-up, if needed.
 3. Reinforce post-op discharge instructions, as needed and any further instructions.
 4. Any serious positive findings such as: fever, bleeding, vomiting, persistent or new-onset pain, abdominal distention reported by the patient, or a visit to the ER or Urgent Care for any of the above or other complications must be communicated daily to the Supervising Nurse, Nurse Manager, and the involved surgeon or responsible physician for appropriate disposition and follow-up. All forms with any positive findings will be kept in the Postop Telephone Call folder, placed in the Peri Operative Holding Area (POHA), and tracked via the Post OP Telephone Call Quarterly Report. Once report

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has been presented at the ASC MAC Committee and no further follow-up is needed, printed copy of the follow-up call may be properly disposed of.

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5. Once the physician is notified the positive serious findings and has given instructions to the nursing staff; the nursing staff will contact the patient to communicate the instructions regarding follow-up care.
 6. Notify Infection Preventionist if patients answered **Yes** to any infection related questions.
 7. If unable to reach the patient within 24-72 hours after surgery, attempt to reach patient two (2) more times over the next three to four (3-4) days. Document attempts to contact patient in the patient's medical record. Only three (3) attempts will be made.
- C. If the patient has responded "yes" to any question asked previously, a second follow-up call will be placed within 7 days post procedure, as follows:
1. Follow up and document any questions that the patient has replied "yes" in the previous postoperative phone assessment.
 2. Refer the patient to the appropriate HDRHC Clinic, if the patient did not keep appointment or otherwise indicated.
 3. Any serious positive findings such as: fever, bleeding, vomiting, persistent or new-onset pain, abdominal distention reported by the patient, or a visit to the ER or Urgent Care for any of the above or other complications will be communicated immediately to the Supervising Nurse/Nurse Manager and involved surgeon or responsible physician for appropriate disposition and follow-up.
 4. Once the physician is notified of the positive serious findings and has given instructions to the nursing staff, the nursing staff will contact the patient to communicate the instruction regarding follow-up care.
 5. Notify Infection Preventionist if patients answered **Yes** to any infection related questions.
 6. If unable to reach the patient within 7 days after surgery, document attempt to contact patient in the medical record.
- D. Prior to the end of the shift, a nursing staff will be assigned to print out the daily case schedule and write patient's contact number for POHA nursing staff to use when they make the phone call.
- E. A nursing staff will be assigned on a weekly basis to complete post-operative telephone assessment calls within 24-72 hours after surgery.

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- F. A nursing staff will be assigned daily to confirm completion of the post-operative telephone assessment call within 24-72 hours after surgery. Any non-compliant findings will be addressed, corrected and reported immediately to the Supervising Nurse. At the end of the week, the assigned nursing staff will submit completed daily case schedule to the Supervising Nurse.
- G. The Supervising Nurse will review, on a monthly basis, the previous month's Post-Operative telephone calls forms of patients with significant findings and reconcile against the medical record to identify actions taken.
- H. Lack of compliance with notification of Supervising Nurse and surgeon will be tracked on an individual basis and used to provide feedback to the individual nurse and assess performance during annual evaluation.
- I. Quality Management Nurse will perform monthly audits of the activity log and present findings to the ASC Medical Advisory Committee meeting on a quarterly basis.

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