



Reducing Readmission for Bariatric Surgery Patients

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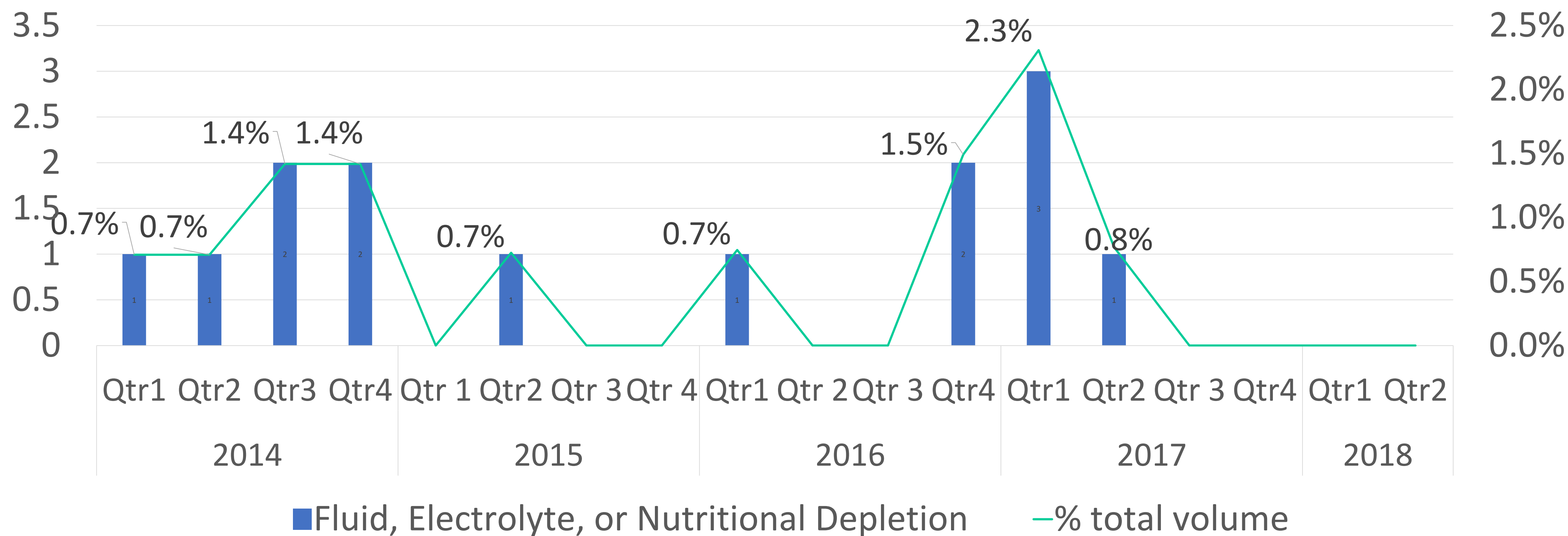
INTRODUCTION

The American College of Surgeons and the American Society for Metabolic & Bariatric Surgery developed the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) to foster patient safety and surgical excellence.

The Salem Health Bariatric Surgery Center (BSC) received accreditation through MBSAQIP in 2013 and has maintained that status since.

In 2014, MBSAQIP identified nausea, vomiting and diarrhea (N/V/D) as the major reasons for readmission of weight loss surgery patients postoperatively. In response, the BSC reviewed their cases for N/V/D and chose to reduce the number of cases through a quality improvement project.

Bariatric Surgery Center N/V/D Readmissions Rate



PROBLEM

In January 2017, 2.3% of bariatric surgery patients were readmitted postoperatively to Salem Health for N/V/D symptoms.

INTERVENTIONS

- Pathway Development
 - Collaboration with the surgeons, clinical pathways were established with standardized questions to be asked of patients. Nutrition manuals were updated
- EPIC Integration
 - Collaboration with IT to integrate the standardized questions in to a template for RN and MA's to use when taking sick calls from patients
- Education of Pathways
 - All clinic staff education on new clinical pathways
- Reevaluation of Readmission Rates
 - In April 2017, readmission rates dropped to 0.8%
- Continual Monitoring of Patients
 - RN follows patients until symptoms improve. Dietitians monitor lab results and provide fluid and protein supplement recommendation as needed.
- Reevaluation of Readmission Rates
 - As of July 2017, readmission rates for N/V/D has sustained at 0% due to the great collaboration of care between interprofessional decision-making team members
- Communication with Wound & Infusion Clinic
 - RN collaborated with Wound & Infusion Clinic on a pathway for timely outpatient management of patients with N/V/D

ADDITIONAL INFO AND BACKGROUND

In the first quarter of 2017, the BSC had the highest readmission rate on record for N/V/D, which was 2.3% of patients. The BSC did not have an established treatment plan for those postop patients.

In mid 2017, the office underwent restructuring which provided a dedicated nurse and an additional medical assistant to provide improved patient access to prompt care..

OUTCOME

PRE	INTERVENTION	POST
Timeline	Timeline	Timeline
2014 - 2016	April 2017 - June 2017	July 2017 - June 2018
Baseline Data		Maintained
0.7% - 2.3%		0%

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