

evidence supports the hypothesis that there is no difference between the two oxygen delivery systems.

**Conclusion:** This research will help improve patient safety and decrease hospital cost and waste. Practice has been changed based on the study findings and the unit had a substantial decrease in supply costs for oxygen maintenance.

**Implications for perianesthesia nurse:** Improve the post-operative patient's experience by making them more comfortable and reducing the risk of injury. There will also be potential for reducing hospital costs in equipment and nursing time.

### A RETROSPECTIVE ANALYSIS TO ANALYZE HEALTH DATA AND OSA RISK IN WOMEN



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**Introduction:** At our institution, the STOP BANG tool is used to screen patients preoperatively for OSA risk. Each "yes" answer is issued one point. For a score of 5 on the 8 point scale, the patient would be monitored on capnography post operatively.

**Identification of the problem:** Woman who score 4 on the 8 point scale do not meet the criteria for capnography. Based on the STOP BANG tool, male gender receives one point. PACU staff nurses recognized women who scored a 4 were having episodes of desaturations and apnea while in the PACU.

**Purpose of the Study:** The purpose of this study is to examine the clinical outcomes of female patients screened for OSA using the STOP BANG tool who did not qualify for capnography (due to a score of 4 rather than 5, based on female gender alone) compared to men who qualified for capnography (due to score of 5).

**Methodology:** The incidence of OSA is reportedly higher in men than women. As a result, women screened for OSA using the STOP BANG tool are automatically assigned a one point deduction based on gender alone. There may be insufficient evidence to support the difference in OSA scoring between men and women. This study will use a retrospective chart review, over a two year span, to examine the medical records of patients who were screened for OSA preoperatively at our institution. Data will be analyzed for select indicators which are linked to overall health status following surgery.

**Results:** The data is being collected at this time. We speculate the results will demonstrate that all women with a score of 4 should have capnography monitoring for safe patient care post operatively.

**Discussion:** To determine if women who score a 4 have similar post op issues as men who score a 5.

**Conclusion:** Data is still being collected at this time.

**Implications for perianesthesia nurses and future research:** If the data reveals that women have respiratory complications due to undiagnosed OSA compared to men, a change in practice would be needed.

### EXAMINING NURSE SATISFACTION USING THE DIGITAL PATIENT SUMMARY: A FASTTRACK METHOD OF HANDOVER REPORT



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**Introduction:** In today's patient care setting, the adoption of technology and digital format is inevitable. The literature indicated that digital patient summary improves the quality, safety and efficiency of patient care. Digital patient summary serves as a tool for PACU nurses to use during handover report before patient's transfer to another nursing unit, service and facility.

**Identification of the problem:** Providing a comprehensive handover report is crucial to patient safety. In the electronic medical record (EMR), data were posted in several sections that resulted nurse's failure to find important data before patient's transfer. The emergence of digital documentation brought challenges to PACU nurses who are not savvy navigating the system.

**QI question/Purpose of the study:** The purpose of this study was to explore whether the use of a digital patient summary, a fast track method of handover, impacts PACU nurse's satisfaction.

**Methods:** Digital patient summary was created and designed by staff nurses. Patient's data flow through the patient summary section once the documentation is updated in the EMR. The pilot study of implementing the digital patient summary for handover was done in PACU of the facility. All participants completed the survey at 1 month and 2 months post implementation of the digital patient summary to examine the impact of its use during handover report related to nurse's satisfaction.

**Outcomes/Results:** Matched pair t tests revealed significant differences between the first and second month survey result after the digital patient summary was implemented. The survey results found that PACU RNs were more satisfied with the use of digital patient summary during the second month.

**Discussion:** The use of digital patient summary during handover report prevents communication gaps between nurses. Patient safety is at risk when there are breakdowns in communicating the relevant information for patient care.

**Conclusion:** The integration of a patient summary section assisted PACU nurses to find pertinent patient information easily in the EMR. It promotes an effective and comprehensive reporting process from PACU and beyond.

**Implications for perianesthesia nurses and future research:** The changes in health care industry affect every nursing practice. Health care is becoming complex and nursing practice has to face the challenge to provide safe and excellent care. Implications for future research may replicate the use of the digital patient summary in every patient services beyond PACU setting.