

# DISCUSSION GUIDE FOR CLINICAL LEADERS: SURGERY SUPPLEMENT

This guide presents a list of surgery-specific considerations that affiliating organizations should jointly consider, with a goal of increasing the value of care for their joint patient population.

## INSTRUCTIONS

Working together, consider the following discussion prompts as you seek to make explicit the similarities and differences between your organizations and collaborate on how you can protect and improve patient safety.

## EMERGENCY SITUATIONS

How does one get help for airway emergencies during nights and weekends?

Describe the on-call availability of vascular surgeons and thoracic surgeons (include variation on nights, weekends, and holidays).

Describe your protocol for identifying and transferring patients whose clinical complexity exceeds the unit's ability to care for them on the floor.

Are there cases and conditions for which this hospital's anesthesia department is not comfortable or equipped to provide care?

## ROLES AND RESPONSIBILITIES

What do you do to foster a team approach in the OR?

## INFRASTRUCTURE AND RESOURCES

What roles do physicians play in your pre-admission testing center? Consider:

- » Who sets standards?
- » How are services/consults accessed?
- » What is measured?

What criteria do you use for establishing operating privileges (which operations a surgeon may schedule)?

What are the guidelines for surgical and medical staff coverage on nights and weekends?

What is the availability of critical consulting services (cardiology, renal, and infectious diseases) at night and on weekends?

What is the policy for doing cases in the operating room overnight and/or on weekends?

Explain how the pre-operative process assures that there is sufficient information and time to make certain that a patient undergoing an elective surgery is optimized for that surgery.



## **PATIENT SAFETY AND QUALITY IMPROVEMENT**

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Describe your system for tracking operative complication rates in each department.

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What is your policy on concurrent surgery?

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What is your policy on procedural volume standards?

## **QUANTITATIVE PATIENT SAFETY PARAMETERS**

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How many morbidity and mortality conferences occurred last year?