LEARNING OBJECTIVES FOR POSTANESTHESIA CARE ROTATION, UCSD MEDICAL CENTER

I. PATIENT CARE

Residents will demonstrate competence in:

1. Evaluating and managing postoperative pain, postoperative nausea and vomiting, hemodynamic and cardiovascular disturbances, airway difficulties, neurologic issues, shivering, readiness for discharge.

2. Diagnosing and treating residual neuromuscular blockade.

3. Procedures as needed in the PACU, such as intubation, line placements, regional anesthesia for postoperative pain, interpretation of diagnostic tests and others.

4. Recognizing and ordering appropriate studies to establish a diagnosis or evaluate severity when needed.

5. Transferring patient care to other responsible parties (ICU nurses, other medical teams, ensuring patient safety, patient comfort and continuity of care).

6. Evaluating and implementing priorities in patient care

II. MEDICAL KNOWLEDGE

1. Be able to discuss the physiological changes in the CNS, respiratory, cardiovascular, renal and gastrointestinal systems, thermoregulation and acid base-balance following surgery.

2. Be able to discuss pharmacodynamics, pharmacokinetics and metabolism of anesthetic drugs, including opioids and opioid antagonists, benzodiazepines and benzodiazepine antagonists, NSAIDS, muscle relaxants and reversal agents, local anesthetics, Inhalational anesthetic agents, antiemetic drugs and vasoactive agents (inotropes and vasodilators).

3. Discuss various treatment options for postoperative pain control, postoperative nausea and vomiting, shivering and hypothermia, cardiovascular disturbances, fluid and electrolyte imbalances, neurologic disturbances and residual anesthetic effects.

4. Detail the management of postoperative airway obstruction, ventilatory disturbance, respiratory arrest and cardiac arrest.

5. Understand ventilator management, when postoperative ventilation is necessary and how to wean postoperative patients from ventilatory support.
III. PRACTICE-BASED LEARNING AND IMPROVEMENT

1. Maintain a log of interesting cases or problems managed, including possible etiology, treatments and results.

2. Research and present a topic on PACU issues to the morning conference; present an anesthesia in-service to the PACU nurses.

3. Be able to seek out scientific evidence and apply it to decision making.

4. Be able to critically evaluate the postoperative management guidelines and supporting literature

5. Compare evidence-based practice to commonly taught experience based decision making to develop a personal practice strategy.

6. Demonstrate understanding how to assess the impact of one’s actions on outcomes

IV. INTERPERSONAL AND COMMUNICATION SKILLS

1. Maintain accurate and timely PACU records.

2. Demonstrate effective communication with patients and their families, nurses, nurse practitioners and physician colleagues.

3. Understand the role of teamwork and be able to effectively manage consulting services.

4. Learn and demonstrate techniques to decrease patient and patient family anxiety.

5. Demonstrate the ability to effectively communicate concerns with surgeons.

6. Learn effective communication techniques during periods of severe stress, anxiety and complex patient care.

V. PROFESSIONALISM

1. Demonstrate compassionate and respectful behaviors when interacting with patients and their families.

2. Demonstrate independence and initiative

3. Carry out PACU duties diligently.

4. Demonstrate a commitment to advocating patient care that is appropriate for their individual needs.

5. Adhere to institutional and departmental standards and policies.

6. Demonstrate ability to appropriately take on, share and delegate patient care responsibilities.
7. Demonstrate the ability to effectively balance one’s own personal affairs with clinical and educational duties as outlined in this document.

8. Respond to calls for assistance in a timely manner.

9. Demonstrate a physical presence in the PACU for much of the day.

VI. SYSTEMS-BASED PRACTICE

1. Understand criteria for admission to the PACU vs. other sites, such as the direct observation unit, the intensive care unit, the ambulatory surgery unit or recovery facilities associated with the same day procedure suite.

2. Understand and implement criteria for PACU discharge to home, hospital ward or ICU settings

3. Manage patient discharge appropriately, including short stays and disposition of patients with obstructive sleep apnea.

4. Be able to assist patients in dealing with systemic and bureaucratic complexities.

5. Learn how to consult or work as a team member with health care managers or health care professionals to assess, coordinate, and improve health care.

6. Be able to discuss how types of medical practice and delivery systems differ from one another, including methods of controlling health care costs and allocating resources.

7. Understand how their patient care and other professional practices affect other health care professionals, other medical services, and how these elements of the system affect anesthesiology/pain/critical care practices.

8. Learn how to affect improved operating room efficiency safely.

9. Appreciate the complex interactions that go on between primary care teams, consulting services, surgeons and anesthesiologist in the overall hospital management of patients.

10. Become familiar with postoperative quality assurance indicators.