Enhanced Recovery University of Texas
"ERUT"
UT Health East Texas, Tyler
ERAS/ERUT Journey

Joined NSQIP 2013
• 2016 Saw a increase of Colon SSIs per NSQIP and Infection Control data—Started work on ERAS
• 2017 Went LIVE with Bowel Enhanced Recovery for Colons.
• 2018-2019 Opportunity to join the ERUT Consortium
• ERUT Team assembled
• REDCAP training, abstraction, measuring of progress
• March 2019 Implementation Phase of ERUT began
• July 2019 LIVE DATE for ERUT Colons
Implementation Phase - What we found/What we did

- Not all general surgeons were doing ERAS for their colon patients.
- Shared ERAS information with surgeons that were not using ERAS for their colon patients. On-boarded new surgeons to ERAS for colons.
- Did our patients understand our Patient Education Information?
  - Not able to determine if all our patients were understanding/following their Patient Education Information.
- Revised our Patient Education material to give the patient more information about the ERAS elements and process.
- Shared information with the patient that ERAS was a partnership between patient and caregivers to help them recover quickly and get back to their baseline before surgery.
What we found/What we did

Why were our patients only drinking the carb drink the night before surgery?

Worked with our Healthy connections partners (Pre-op Health Exam) to reinforce the Patient Education Information with the patient.

Distributed the ERAS elements to our Healthy connection partners to reinforce with patient they are able to consume clear fluids and the high carb. drink up to 2 hours prior to surgery start time.

Where did our patient “Daily Activity Sheet” go?

Worked with the Director and Manager of post-op surgery unit to reinstate the “Daily Activity Sheet” for our patients.
What we found/What we did

• Pre-op nurse WIZARD-pre-op questions for the patient. Not always being asked.

• Manager of pre-op will continue to educate nurses of “need to know questions” to ask of patients when they arrive for surgery in pre-op holding area. ERAS coordinator will notify Manager when questions not asked.

• Were our patients involved in their care and recovery?

• ERAS/ERUT coordinator and Director of post-op surgery unit rounded on patients post-op to reinforce participation in their care by utilizing the “Daily Activity Sheet” while in the hospital.
Overcoming Barriers

- Have a good working relationship/communication with your Surgeons, Anesthesia Dept., Directors/Managers of Pre and Post OP, Directors/Managers of Surgery Post-op Units, Educators and Nurses in the Arena.
- When abstracting/monitoring for compliance, immediately follow up and educate when you see that something is falling through.
- Communicate/Brainstorm with your Team/Managers and beyond to find ways to hardwire the processes till you achieve standardization.
- Have managers and educators ready to educate NEW staff on ERAS elements and patient care.
- Reach out to others that have been through the process, if you are not sure how to move forward.
UT Health – Future Direction

- 2018 Bariatric Program initiated ERAS. MBSAQIP
- January 6th, 2020 UT Health Tyler went LIVE with ERAS Lap Hysterectomies
- Going forward for 2020
  - ERAS Mastectomies
  - ERAS C-Sections
Questions?