

CRITERIA FOR PREOPERATIVE EVALUATION IN OUTPATIENT SETTINGS

Erik Bernardes Moreira Alves

<http://lattes.cnpq.br/1449821778039298>

Carlos Eduardo Silvestre Amthauer

<https://lattes.cnpq.br/0787623203483207>

Mariana Rodovalho Parra

<https://orcid.org/0009-0008-9542-2930>

Edson Pereira dos Santos Junior

<http://lattes.cnpq.br/5019174054043801>

Carlos Eduardo Barcelos Dossa

<https://orcid.org/0009-0001-0624-6779>

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Abstract: The continuous advancement in the complexity of surgical procedures in parallel with the increase in the population's life expectancy has led to a challenging scenario for anesthetic practice, requiring a careful preoperative assessment for the success of the surgery. In this context, the anesthesiologist plays a crucial role in the preparation and evaluation of patients, seeking to expand the scope of Anesthesiology by assuming responsibilities that were traditionally attributed to clinicians or cardiologists, aiming not only to improve the quality of care, but also to optimize the management of the process. Several anesthesiology services adopted the Just in Time management strategy 25 years ago to structure a preoperative assessment outpatient clinic, aiming to optimize service time, maintain quality and reduce costs. With a multidisciplinary team and an immediate support system to complement clinical investigation, the service seeks to increase productivity, reduce hospitalization time and minimize unnecessary procedures, meeting both the needs of patients and professionals involved in providing medical care.

Keywords: Outpatient clinic, Anesthesiology, Surgery.

INTRODUCTION

The constant advancement of medicine and the increase in life expectancy have been accompanied by the emergence of increasingly complex surgical procedures, representing a significant challenge for anesthetic practice. The preoperative evaluation of these patients has become a fundamental pillar for the success of surgeries, requiring a careful and comprehensive approach. Although traditionally the responsibility for preparing and evaluating candidates for surgery has been assigned to clinicians or cardiologists, anesthesiologists are playing an increasingly prominent role in this process, expanding

their responsibilities and contributing to improving the quality of care, in addition to seeking to expand the scope of Anesthesiology as a medical specialty.

In response to this growing demand, approximately 25 years ago, several anesthesiology services began efforts to establish outpatient clinics specializing in preoperative evaluation. These outpatient clinics, based on the Just in Time management principle, focus on optimizing time, ensuring the quality of care and efficient cost management. Through these offices, we seek to streamline and improve the care offered to external patients, while meeting the internal operational needs of healthcare professionals and medical units, resulting in greater efficiency, cost reduction and general improvement of experience for both patients and healthcare professionals.

The structuring of these outpatient clinics involves a multidisciplinary team, made up of anesthesiologists, nurses, nursing assistants, secretaries and IT professionals. Under the coordination of an anesthesiologist, these teams guarantee comprehensive support to patients, including laboratory analysis, conventional radiology, electrocardiogram and consultations with other medical specialties, all quickly and efficiently. This integrated approach aims not only to optimize the preoperative assessment process, but also to ensure quality, personalized care for each patient, adapting to their specific needs and minimizing unnecessary procedures.

After years of activity and consolidated experience, these anesthesiology services are constantly seeking to evaluate and improve their practices, identifying strengths and areas for improvement to develop new strategies and ensure increasingly effective and patient-centered care.

The service team is made up of highly qualified multidisciplinary professionals, which include five anesthesiologists, a nurse specialized in perioperative care, a nursing assistant trained in anesthetic techniques, a secretary with experience in health management and an IT technician with knowledge of systems. integrated doctors. This diversity of skills and specializations guarantees a comprehensive and integrated approach to patient care, ensuring high-quality care at all stages of the surgical process.

The coordination of these professionals is carried out by a senior anesthesiologist, reporting directly to the Head of the Anesthesiology Service, which guarantees efficient management and aligned with the health institution's policies and guidelines. Furthermore, the service is supported by an advanced immediate support system, which encompasses complete laboratory analyses, high-resolution radiological images, accurate electrocardiograms and rapid consultations with the Internal Medicine team, which are essential for conducting detailed investigations and preparing appropriate clinical practice of patients with serious or complex conditions.

The operational structuring of the service was meticulously planned and implemented based on successful models described in the medical literature specializing in anesthesiology and perioperative care. After almost three years of continuous activity, during which more than twenty-five thousand patients were served and the basic structure was consolidated, the service began a process of detailed evaluation of the level of customer satisfaction. This process involved a careful analysis of strengths and opportunities for improvement, aiming to identify specific areas for improvement and development of new strategies that can further improve the quality of care offered and the experience of patients served.

Furthermore, the service adopts strict safety and infection control protocols, following the guidelines established by national and international health organizations, ensuring a safe environment for patients throughout the surgical process. These protocols include adequate sterilization of equipment, the use of aseptic techniques during procedures and constant monitoring of infection indicators, contributing to the prevention of complications and increasing the reliability of the results obtained.

This holistic, patient-centered approach permeates all activities of the anesthesiology service, from pre-operative assessment to post-surgical follow-up. The constant search for excellence in service and continuous improvement reflects the team's commitment to offering the highest standard of care to patients, promoting not only physical recovery, but also emotional and psychological well-being throughout the surgical treatment process.

GOAL

Explore pre-surgical care in context.

METHODOLOGY

The present work consists of a qualitative literature review that sought to address results found in research on surgical and anesthesiological topics, whether in a comprehensive, orderly or systematic manner. To carry out the work, the following steps were followed:

1. Selection of corresponding themes;
2. Selection of samples found and used;
3. Analysis of the characteristics of the original research;
4. Analysis of the results obtained;
5. Carrying out the review.

The scientific literature databases and the techniques used to carry out the review were Google Scholar, Scientific Electronic Library

Online (SciELO), Virtual Health Library, Latin American and Caribbean Literature in Health Sciences (LILACS).

Thus, the present work seeks to analyze the surgical interface within the different thematic points correlated to the outpatient front, aiming to shed light on an educational path in anesthesiology.

DISCUSSION

In the journey of implementing pre-anesthetic assessment services, we faced significant challenges in organizing the stages of the process and in the acceptance of evidence-based preoperative procedures by anesthesiologists. By recognizing this reality, we identify critical areas and initiate actions to improve them.

Currently, the operational logistics of the outpatient clinic make it difficult to efficiently receive patients due to standard scheduling, resulting in unnecessary waiting and a fixed order of service. Despite demands for more administrative staff, waiting for appointments did not substantially affect patient satisfaction.

However, we recognize that the introduction of appointment booking would be a crucial change to optimize care, providing a more efficient and satisfactory experience for patients during the pre-anesthesia assessment. This evolution is essential to meet the team's objectives and patients' expectations, promoting a more agile and effective process.

Although we received requests from patients to increase the number of secretaries, waiting for appointments did not have a significant impact on the overall satisfaction of this group. However, it is important to recognize that implementing a system for scheduling appointments by appointment would be a necessary evolution to meet not only the team's objectives, but also the expectations of clients.

This change would not only help to optimize the flow of patients in the outpatient clinic, ensuring more agile and efficient care, but would also contribute to improving the overall patient experience during the pre-anesthetic assessment process.

Appointment scheduling would allow for a more equitable distribution of patients throughout the day, avoiding peak wait times and ensuring more efficient use of available resources. Furthermore, it would provide patients with greater predictability regarding their appointment time, reducing the anxiety and discomfort associated with prolonged waiting. This change would also have positive impacts on the team's productivity, allowing for more effective planning of activities and more efficient use of available time.

Finally, the introduction of appointment scheduling would not only meet patients' demands for more agile and efficient care, but would also represent an important step in the ongoing search for excellence in the service provided. This evolution reflects the team's commitment to offering quality, patient-centered care, aligned with the best practices and standards of care in the healthcare sector.

The expansion of evaluation to all patients represents a growing demand due to frequent emergencies and the lack of adherence of some surgical teams to the established system. Strategies such as creating a reserve of appointments for urgent cases on the agenda, in addition to educational and inspection measures to ensure compliance with standards, are essential to minimize this gap and ensure a more efficient flow in the pre-anesthetic assessment process.

The computerization of assessment and professionals' access to data, although initially implemented, revealed maintenance flaws over time, which ended up reducing its usefulness. The way to improve this situation involves improving the database, carrying out

exhaustive tests to ensure its efficiency and reliability in providing crucial information for pre-anesthesia assessment.

Another issue highlighted was the need to standardize conduct in pre-anesthetic assessment among Surgical Center professionals, aiming to ensure a more homogeneous and safe approach for all patients. This alignment of protocols and practices is essential to ensure the safety and success of surgical procedures, providing a more consistent and reliable experience for patients and medical staff.

Faced with these challenges, the search for innovative solutions and the constant review of processes are essential to guarantee excellence in pre-anesthetic assessment, contributing to quality and safe care for patients undergoing surgical procedures.

The apparent lack of standardization in outpatient preoperative care can be attributed to several reasons, such as the complexity of current surgical procedures and the constant evolution of medical guidelines. Technological advances in the health sector also contribute to the diversity of approaches and techniques available, which can generate variations in the behaviors adopted by health professionals.

Although the literature accepts a margin of divergence of up to 3% in conduct between anesthesiologists, it is necessary to address deeper issues related to communication and continuing education of health professionals. Effective dissemination of updated protocols and guidelines, along with ongoing training programs, is essential to ensure a uniform and safe approach to outpatient preoperative care.

Furthermore, interdisciplinary collaboration between anesthesiologists, surgeons, nurses and other healthcare professionals plays a fundamental role in standardizing preoperative management. Sharing knowledge and experiences, together with the use of electronic health record systems and efficient

communication tools, can facilitate the harmonization of practices and promote more integrated and effective patient care.

These initiatives aim to reduce controversies and promote excellence in the provision of care to patients before surgical procedures, ensuring an evidence-based approach aligned with the best practices of modern medicine.

Although we have achieved a good level of satisfaction among the groups evaluated in relation to the Outpatient Pre-Operative Assessment Service, we recognize that our objective goes further: we seek not only to meet, but to exceed the expectations of our clients, making this our main goal.

To achieve this goal, we are constantly reviewing and improving our processes, seeking new strategies and tools that allow us to offer an increasingly efficient, personalized and high-quality service. Furthermore, we invest in the continuous training of our team, ensuring that they are always up to date with the best practices and technologies available in the healthcare sector.

We believe that by maintaining this commitment to excellence and innovation, we will not only meet our customers' expectations, but also contribute to raising the standard of healthcare offered, providing a positive and safe experience for everyone involved in the assessment process. outpatient preoperative period.

CONCLUSION

The implementation of pre-anesthetic assessment services is marked by significant challenges, especially with regard to logistical organization and the acceptance of conduct based on clinical-epidemiological evidence by anesthesiologists. These difficulties have driven the team to adopt a proactive approach to identifying and resolving such issues, with the clear aim of improving the quality of care offered to patients in the outpatient setting.

One of the main obstacles faced is the need to expand assessment to all patients, especially in urgent and emergency situations, while seeking to harmonize the conduct of professionals working in the Surgical Center. The lack of standardization and efficient dissemination of existing protocols also contributes to the diversity of practices in pre-anesthetic assessment, highlighting the crucial importance of adequate dissemination of these protocols among health professionals.

Despite the good evaluation received by different groups regarding the service provided by the Outpatient Pre-Operative Assessment Service, the challenge of exceeding customer expectations remains a central objective. This highlights the continuous need to improve processes, invest in training and effective communication, as well as the constant search for technological innovations that can contribute to increasingly personalized and efficient service.

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