

Stanford Hospital And Clinics OR REGION	DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE	ORAM D 4.05 Issued: 10/02 Last revision/review: 4/10
---	--	---

REFERENCES: The Joint Commission Accreditation Manual for Hospitals
American Society of Post Anesthesia Nurses: Standards of Post
Anesthesia Nursing Practice (1991, 2002).

RELATED DOCUMENTS:

SHC Administrative Manual:
“Discharge of Patients by Criteria, a Standardized Procedure”.
“Discharge Teaching, Outpatient”.
“Pain Management Philosophy”
“Pain Management Protocol”

I. POLICY

All patients who have received general anesthesia, regional anesthesia, or monitored anesthesia care shall meet discharge criteria for Phase I and Phase II recovery.

II. PURPOSE

To define the physiological criteria that must be met for the safe discharge from Post Anesthesia Care. Discharge criteria, inclusive of a post anesthetic recovery score system (PAS), will be used by the Post Anesthesia Care RN to assess patient’s readiness for discharge from Post Anesthesia Care.

III. SUPPORTIVE INFORMATION

A. Definitions

1. Postanesthesia Phase I

This phase focuses on providing postanesthesia patient care to the patient in the immediate postanesthesia period, transitioning them to Phase II, the in-patient setting, or to an intensive care setting for continued care. Basic life sustaining needs of the patient are of the highest priority and constant vigilance is required during this phase.

2. Postanesthesia Phase II

This phase focuses on preparing the patient, family, and/or significant other for care in the home, or an extended care environment.

3. Post Anesthetic Recovery Scoring System (PAS) [Modified Aldrete Scoring System]

1. Consciousness:

<p>Stanford Hospital And Clinics</p> <p>OR REGION</p>	<p>DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE</p>	<p>ORAM D 4.05</p> <p>Issued: 10/02 Last revision/review: 4/10</p>
---	---	--

- A. A point score of 2 is assigned when the patient is fully awake, able to answer questions and call for assistance. (The preoperative level of consciousness or awareness is documented on the Adult assessment record on admission in EPIC under Pre-op Navigator). If the patient had an altered level of consciousness before surgery, the patient will receive a point score of 2 when he/she is at the preoperative consciousness level.
 - B. A point score of 1 is assigned when the patient is drowsy but responds easily to verbal commands.
 - C. A point score of 0 is assigned when no response is elicited to verbal commands. Painful stimulation is not employed to elicit a response.
 - D. The minimal score of 1 must be achieved in this category before discharge.
2. Respiration:
- A. A point score of 2 is assigned when the patient is able to breathe deeply and cough.
 - B. A point score of 1 is assigned when the patient exhibits signs of dyspnea or has difficulty breathing and clearing secretions or requires supportive measures to maintain airway patency.
 - C. A score of 0 is assigned when the patient is apneic or requires assisted ventilation.
 - D. A score of 2 must be achieved and maintained in this category for a minimum of one-half hour before discharge.
3. Circulation: Blood Pressure
- A. Score of 2 is assigned when the blood pressure (systolic or MAP) reading is (+) or (-) 20mm Hg the pre-anesthetic level.
 - B. A score of 1 is assigned when the blood pressure (systolic or MAP) reading is (+) or (-) >20-35mmHg of the pre-anesthetic level.
 - C. A score of 0 is assigned when the blood pressure (systolic or MAP) reading is greater than (+) or (-) 35-50mmHg of the pre-anesthetic level.
 - D. Patients with a systolic blood pressure <90mmHg, or a systolic blood pressure >200mmHg, or exhibiting a blood pressure other than their baseline pre-anesthetic blood pressure, must be evaluated by an anesthesiologist prior to discharge.

<p>Stanford Hospital And Clinics</p> <p>OR REGION</p>	<p>DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE</p>	<p>ORAM D 4.05</p> <p>Issued: 10/02 Last revision/review: 4/10</p>
---	---	--

E. A minimum score of 1 must be achieved and maintained for at least three consecutive readings at 15-minute intervals before discharge. The measurement parameters defined in "d" must be met.

4. Circulation: Heart Rate

- A. A score of 2 is assigned when the heart rate is (+) or (-) 20 beats/minute of the pre-anesthetic level.
- B. A score of 1 is assigned when the heart rate is (+) or (-) 20-35 beats/minute of the pre-anesthetic level.
- C. A score of 0 is assigned when the heart rate is (+) or (-) 35-50 beats/minute of the pre-anesthetic level.
- D. Patients with a heart rate of <50 beats/minute, >110 beats/minute, or exhibiting a cardiac rhythm other than their baseline pre-anesthetic rhythm must be evaluated by an anesthesiologist prior to discharge.
- E. A score of 1 or higher must be achieved and maintained for three consecutive measurements at 15-minute intervals before discharge. The parameters defined in "d" must be met.

5. Oxygen Saturation

- A. A score of 2 is assigned when the SpO₂ meets or exceeds the anesthesiologist's parameters on room air.
- B. A score of 1 is assigned when the SpO₂ meets or exceeds the anesthesiologist's parameters on supplemental O₂.
- C. A score of 0 is assigned when the minimum SpO₂ level as established by the anesthesiologist cannot be maintained.
- D. A score of 1 or higher must be achieved before discharge.

6. Activity

- A. A score of 2 is assigned when the patient is able to move all 4 extremities on command, or motor activity has returned to the patient's preoperative status (if a deficit exists).
- B. A score of 1 is assigned when the patient is able to move only 3 extremities.
- C. A score of 0 is assigned when the patient is able to move only 2 extremities.
- D. A score of 2 must be achieved before discharge unless specified in writing by the anesthesiologist.

Stanford Hospital And Clinics OR REGION	DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE	ORAM D 4.05 Issued: 10/02 Last revision/review: 4/10
---	--	---

E. For patients with regional nerve block, a score of 3 may be acceptable with discharge order by Anesthesia.

7. Pain Scale

A. Document the pain scale, using the appropriate scoring scale for the patient (refer to pain management policy).

IV. PROCEDURE

Post-Anesthetic Recovery Scoring System (PAS) will be used by the PACU RN to assess patient readiness for discharge from Phase I. In addition, an anesthesia order for transfer to a nursing unit or discharge will be reflected on the PACU order. Patients who have received monitored anesthesia care and or short anesthetic procedures may be admitted directly to Phase II PACU as determined by the anesthesiologist as noted on the PACU order.

A. Discharge Criteria for Inpatients and Outpatients from Phase I Post Anesthesia Care

Discharge Requirements:

1. Patients must score 10 out of a possible 12 PAS score for transfer or discharge with the defined minimal scores being achieved in each category. Assessment scores will be documented on the PACU record upon admission, 30 minutes and one hour after arrival, hourly thereafter and upon discharge.
 - A. If the patient’s PAS score does not meet the minimal discharge criteria within 2 hours, an anesthesiologist must be consulted. The RN will document the consultation on the PACU record. A verbal or written order from the physician must be obtained before discharge.
 - B. Patients with a physician’s order for transfer to the ICU do not require a minimum PAS score or a discharge order.

2. Oxygen therapy has been discontinued for a minimum of 30 minutes before discharge patients who had general anesthesia.
 - A. Oxygen saturation is maintained within the parameters established by the anesthesiologist in the PACU orders (may be on supplemental oxygen) and/or returned to the preoperative level.

<p>Stanford Hospital And Clinics</p> <p>OR REGION</p>	<p>DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE</p>	<p>ORAM D 4.05</p> <p>Issued: 10/02 Last revision/review: 4/10</p>
---	---	--

3. The last dose of respiratory depressant drug was administered a minimum of 15 minutes (IV, epidural, or intrathecal bolus) or 30 minutes (IM) prior to discharge from PACU.
 - A. Patients receiving continuous opioid infusions (IV or epidural) will meet the minimum point score of 1 in the consciousness score and meet the respiratory discharge criteria
 - B. Patients receiving any reversal agents for Neurovascular blockade or sedative and opioids must be monitored for 30 minutes from the last dose of reversal agent prior to discharge.
4. Temperature is between $\geq 35.5^{\circ}\text{C}$ and 38.5°C or pre- operative baseline.
5. The pain level will be assessed according to the verbal or nonverbal pain scale of 0 (no pain) through 10 (maximum pain) at rest, using the appropriate scoring according to the patient's status (refer to the Pain Management Philosophy and Pain Management Protocol).
 - A. Pain score must decrease from the level indicated upon admission to PACU and/or return to pre-operative level or patient states adequate control while at rest.
6. Patients that have received spinal or epidural anesthesia must be able to bend knees and lift buttocks.
7. The anesthesiologist must be notified 15 minutes prior to discharge of the patient to allow adequate time for a post-operative visit, if order for discharge not previously indicated.
8. Nursing documentation is completed, inclusive of a PAS score, initial nursing assessment and discharge summary.

B. Discharge of Outpatients from Phase I to Phase II Post Anesthesia Care:

1. Outpatients discharged to the Phase II Recovery Area will meet the same discharge criteria as above and including the following:
 - A. Pre-anesthesia orientation level has returned and/or the patient is awake and alert.
 - B. Patient tolerates sitting in an upright position without signs or symptoms of orthostatic hypotension.

<p>Stanford Hospital And Clinics</p> <p>OR REGION</p>	<p>DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE</p>	<p>ORAM D 4.05</p> <p>Issued: 10/02 Last revision/review: 4/10</p>
---	---	--

- C. Patients who received (spinal/epidural) anesthesia must have full return of sensory and motor function to lower extremities and demonstrate the ability to stand and walk with minimal assistance.
2. Patients who received upper arm regional block (brachial plexus blocks) must have an arm sling applied prior to return of full sensory and motor control.
3. Patients who received a femoral, popliteal, sciatic, or ankle block will be given crutches and be instructed to be non-weight bearing until full sensory and motor control have returned.
4. Patients discharged home directly from Phase I must meet criteria defined in Discharge of Patients by Criteria, a standardized procedure.

C. Discharge of Phase II Patients to Home

1. To assure that outpatients are discharged home safely and efficiently. Outpatients will meet following criteria before home discharge.
 - A. Patient is awake, alert, responds to commands appropriate to age, or returned to pre-procedure status.
 - B. SpO2 greater than 95% or pre-procedure baseline on room air for 30 minutes without airway support. Breathing even and unlabored. Respiratory rate greater than 10 and less than 30 for adults.
 - C. Able to sit in an upright position without signs and symptoms of orthostatic hypotension. BP +/- 20 Hq mm of pre-procedure range or within patient's stated normal range. No active bleeding.
 - D. Able to ambulate with minimal assistance or at pre-procedure level.
 - E. Pain score at rest is < 4 or at pre-procedure level at rest and patient states adequate pain control. No IV opioids or sedatives given within 30 minute, any IM agents within 1 hour.
 - F. Patient is not actively vomiting and nausea is mild in severity.
 - G. Patient is able to void if patient had spinal or epidural anesthesia, or use of contrast media.
 - H. IV/ saline lock is discontinued unless ordered to the contrary.
 - I. Arrangements have been confirmed for a responsible adult to accompany the patient home and an individual remains available for the first 24 hours.
 - J. Discharge medication prescriptions are given to the patient.
 - K. Patient discharge teaching and written instructions are provided to the patient and/or companion (refer to Discharge teaching-Outpatient).

Stanford Hospital And Clinics OR REGION	DISCHARGE CRITERIA FOR PHASE I & II- POST ANESTHESIA CARE	ORAM D 4.05 Issued: 10/02 Last revision/review: 4/10
---	--	---

- L. Patient is informed that the staff will make a post-operative telephone call within 72 hrs of procedure, unless specified differently by the physician, or per patient’s request.
- M. Patient is discharged to a responsible adult and escorted out of the hospital.

V. **DOCUMENT INFORMATION**

- Original Date/Author: 10/02
- Custodian of Document: OR Region
- Distribution: This policy resides in the OR Region Administrative Manual
- Review: This policy is reviewed annually by the Manager and any changes must be approved by Director OR Region and the OR Medical Committee.
- Revision History: 2/03, 4/03, 10/03, 8/04, 11/06, 6/08, 4/10
- Approval: This revision was approved by the OR Medical Committee.

This document is intended for use by Stanford Hospital and Clinics/LPCH staff.
No representations or warranties are made for outside use.
Not for outside reproduction or publication without permission
Direct inquiries to: OR Region (650) 723-7853
Stanford Hospital and Clinics
Stanford, CA 94305