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# Implementing the Fast Track Improvement Bundle: A Total Joint Replacement Quality Improvement Project

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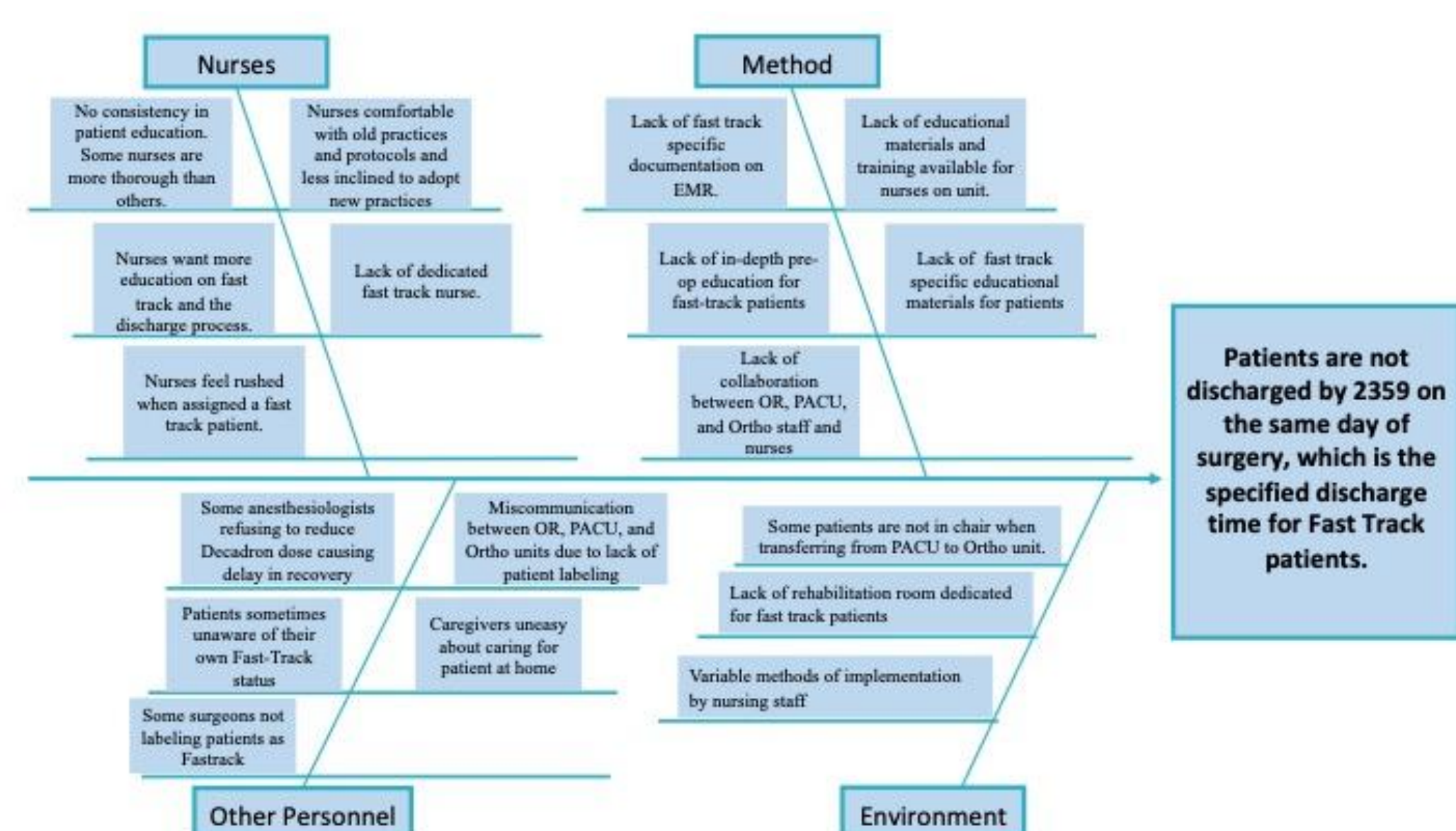
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## INTRODUCTION

The Fast Track program is a patient-centered and evidence-based multimodal approach for improving the health outcomes of post-surgical patients. This program includes a variety of interventions such as early mobilization, physical therapy, effective pain management, and prevention of PONV (postoperative nausea and vomiting).

It is widely used in many hospitals today because it has proven to promote early recovery, reduce postoperative complications, and decrease both length of stay and medical costs. Within a non-profit, Magnet community based hospital, the Fast Track program was implemented in April 2019 for total joint hip and knee replacement patients.

## STATEMENT OF PROBLEM

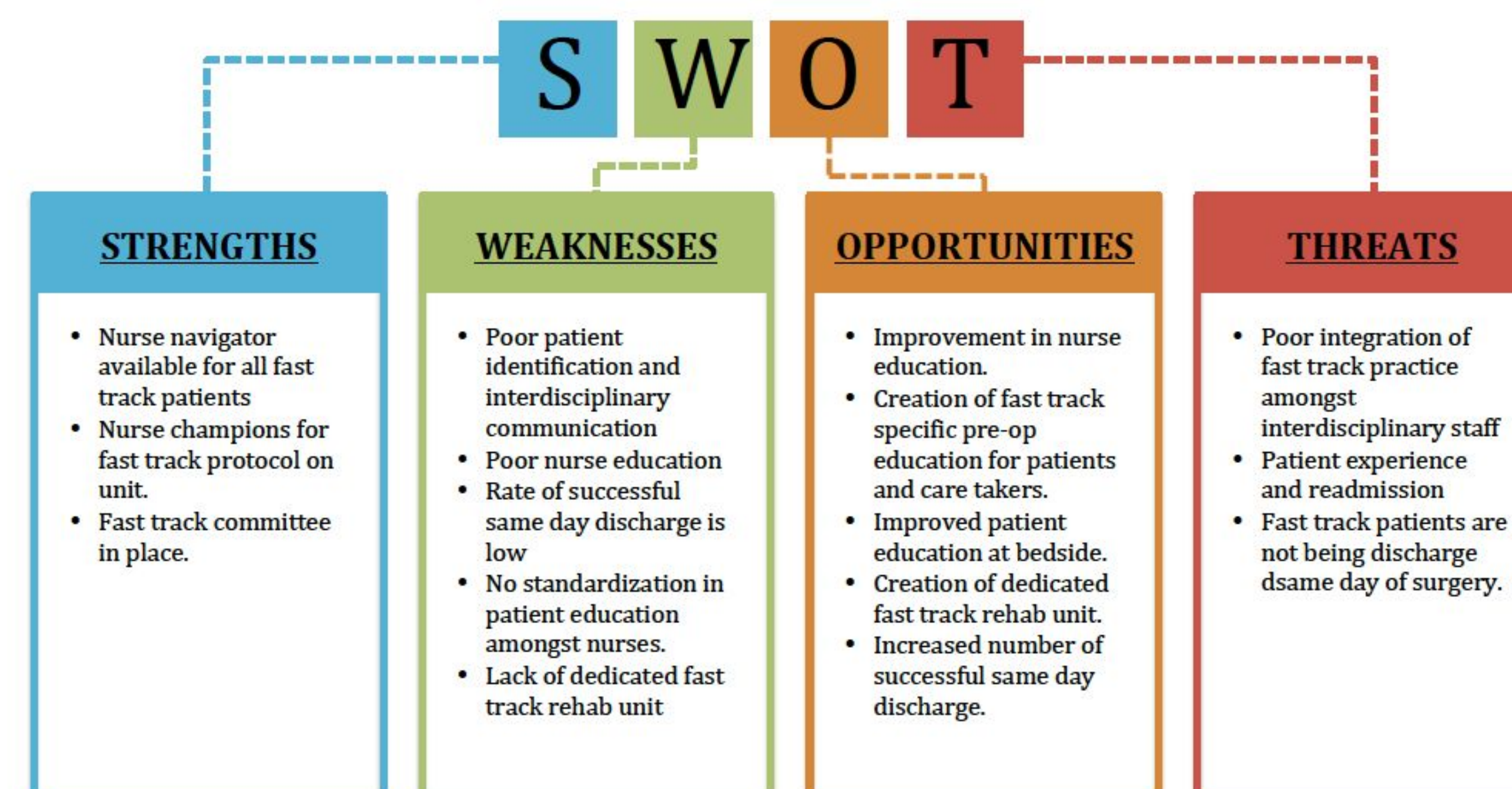


Only 74% Fast Track success rate (26% of Fast Track patients not being discharged on time). **Four main barriers to Fast Track success were found.** 1) No place on Fast Track Checklist to record the time of patient discharge and/or why patient not discharged by 23:59. 2) Patients unaware of the criteria needed to meet in order to be discharged on time. 3) Nurses need more education on the Fast Track Checklist and process, including the proper terminology and guidelines for patient education. 4) Many patients did not know they were Fast Track because the current powerpoint during the preoperative class only mentioned Fast Track one time.

## ASSESSMENT

### Clinical Microsystem Assessment - Five P's

- Purpose-To create an efficient and safe Total Joint Replacement Fast Track Checklist for patients to be discharged the same day on the Orthopedic Unit at a large community-based hospital.
- Patients-50-84 years old. 274 total TJRs, 113 Fast Track patients, 84 successful Fast Track, 30 Off Track, 24 Same Day Discharge patients
- Professionals-Orthopedic Surgeons, Unit Manager, Nurse Navigator, Nurses, PT/OT
- Process- Schedule surgery→ Attend preoperational class→ Have surgery→ Recovery in PACU→ Transfer to Orthopedic Floor→ Discharge same day if requirements for checklist all met
- Pattern-Success Fast Track Discharge→ Current=74%, Target= >95%



## REFERENCES

Kaye, A., Urman, R., Cornett, E., Hart, B., Chami, A., Gayle, J., & Fox, C. (2019). Enhanced recovery pathways in orthopedic surgery. *Journal of Anaesthesiology Clinical Pharmacology*, 35, 35–39. [https://doi.org/10.4103/joacp.JOACP\\_35\\_18](https://doi.org/10.4103/joacp.JOACP_35_18)

## SYNTHESIS OF EVIDENCE

### Research that addresses barriers to Fast Track success:

- In orthopedic surgical cases, patients benefit by playing a more active role in their care.
- Performing an in-service is an appropriate model of education to meet nursing practice demands.
- Continuing education with evidenced-based materials leads to an improvement in nurses' knowledge of post op. care
- Preoperative education reduces patient anxiety and allows patients to have a better understanding of recovery process

## ACTION PLAN

### Four main interventions included in the Fast Track Improvement Bundle:

1. Updated Fast Track Checklist
  - 'Patient ready for discharge' section added
2. Fast Track Discharge Readiness Checklist
  - Patients will be able to track progress.
  - Placed at bedside and easy to read
3. Fast Track Discharge Talking Points
  - Placed behind checklist as education tool.
4. Fast Track Powerpoint slide for preoperative class
  - Highlights meaning of being on Fast Track.

## EVALUATION

### After formal implementation, expected results include:

- For nurses: Decreased safety concerns; increased comfort with time management & available resources; increased understanding of the checklist
- For patients: Ability to recite all aspects of the checklist, with or without the help of the patient-friendly bedside checklist; increased satisfaction with the education process
- Overall: Better recovery; better long-term patient outcomes