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Problem

Veteran needs surgery;
 Needs anesthesia first!

Traditional Anesthesia:

Recovery Room Vicious Cycle

*Cheng, Anesth Analg 2008; 106:264-269

†Wasserman, Reg Anesth Pain Med

2015; 40:687-693

‡Apfel, NEJM 2004; 350:2441-51

Aldrete discharge criteria;
 minimum time 1-2 hours
 Anesth Analg 1970; 49:924-34

J Clin Anesth 1995; 7:89-91

†‡ IV Anesthesia **Fentanyl** Gases *‡ "Low Cost" Rebound Pain*† Nausea‡ Sedating IV Nausea Pain Meds Meds Somnolence

↑Length of Stay, ↑Complications





Overview of Promising Practice

- WAKE Score
 Anesthesiology 2004; 101: 3-6.

 Int Anesthesiol Clin 2011; 49: 33-43
- Zero Tolerance Criteria
 - No Nausea,No Vomiting
 - "No Pain"
 - No Shivering,No Itching
 - Not Lightheaded when sitting upright

WAKE Score "0-10" Criteria:

Blood Pressure /

Heart Rate 2-1-0

Movement 2-1-0

Mental Status 2-1-0

Respiratory 2-1-0

 O_2 Saturation 2-1-0

Score of 8+ needed

- Recovery Discharge
- Recovery Room Bypass





Overview of Promising Practice

Design the Anesthetic to Meet the WAKE Score



Other IV Anesthetics,
Other Pain Relievers DURING Surgery,
Anti-Nausea Meds

Regional Anesthesia (nerve blocks, spinal)

Outpatients Can Bypass Recovery Room, Go Home Sooner Inpatients Who Need
Recovery Room are Eligible
for Hospital Bed Sooner

 \downarrow LOS, \downarrow Complications/*Mortality, ** \downarrow Costs

* in press, Pain Medicine, 2015;

**Anesthesiology 2004; 100: 697-706





Implementation plan + next steps

Implementation Plan

- Likely minimal costs;
 necessary stock items available
- Time to implement: 6-12 mo
- Modify policy, then directors to Meet the WAKE Score enlist surgeons and all anesthesia personnel to implement plan: Improve Veteran Access to elective surgery by improving both day-of-surgery throughput and hospital length-of-stay.
- Hospital operating rooms and recovery rooms, and anywhere requiring moderate sedation.

End of presentation

Putting Veterans First

Design the Anesthetic



