

QUALITY AND SAFETY GUIDELINES OF POSTANAESTHESIA CARE. WORKING PARTY OF POST ANAESTHESIA CARE (1) (European Board and Section of Anaesthesiology- UEMS)

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PACU (Postanaesthesia Care Unit) is a relatively recent name given to what was called in the past recovery room, or recovery unit.

These changes in names demonstrate the evolution of this unit from a simple room where patients roused from sleep into a real Surgical Intensive care unit.

The majority of patients is hospitalized in this unit for a short period of time after the operation or invasive procedures, and then released back to ward.

Recently, as a consequence of shortness of Intensive Care beds, in many hospitals patients are treated in PACU for longer periods of time (days and sometimes even weeks) ventilated, and monitored as in real Intensive Care Unit.

From units open only in the morning for elective surgery, developed PACU units into a 24 hours unit.

Who runs the PACU?: The majority of PACU are run by anaesthesiologists and under their responsibility. (2)

Transport to PACU: The transfer from the operating theatre to PACU or intensive care unit is one of the most difficult stages in the care of a patient (especially for intensive care patients).

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A comparison between transport of patients and formula one pit stop team work will be presented

Postoperative assessment and monitoring (3): Patient should be observed continuously by adequately trained staff. Special attention should be paid to: Respiratory function; cardiovascular function; mental status; temperature; pain; PONV (postoperative nausea and vomiting); hydration; urine output; drainage and bleeding.

Anaesthesia and PACU electronic chart: In our hospital an anaesthesia electronic chart is used for every patient covering preoperative assessment; intraoperative management and monitoring; PACU postoperative assessment and ICU. This model will be presented.

Music therapy in PACU: apart from PCA (patient controlled analgesia) and other conventional therapies, we offer healing (relaxing) music through headphones to our patients.

Bibliography:

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