

Patient and Family Centered Ostomy Care: An Evaluation of Patients that Utilize the Teaching and Resources of the Enhanced Recovery after Surgery Program (ERAS)

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Background

Nationally, ileostomies and other fecal ostomies have unfavorably high 30-day post-operative emergency room admission and hospital readmission rates. Enhanced Recovery After Surgery (ERAS) is a multimodal program that incorporates preoperative education, best practice methodology, and standardized post-operative care to provide optimal surgical outcomes in the perioperative and postoperative patient. For ostomates, the focus is placed on preoperative health optimization, patient education and resource guidance to assist patients in making educated and informed decisions in their surgical venture; giving patients the ability to independently access the provided available resources if encountering a variety of ostomy related issues or complications. The education and resource guidance aims to decrease overall preoperative anxiety and increase patient confidence in ostomy self-care, furthermore preventing emergency room visits and consequential hospitalizations.

Purpose

To evaluate the educational efficacy and overall reduction in hospital readmissions of new ostomates that received preoperative ostomy education, resources and postoperative access to the “World” Ostomy Nurse Practitioner through the Enhanced Recovery After Surgery (ERAS) program. The goal of the ERAS program is to provide preoperative surgical optimization and prehabilitation.

Methods

Patient education and provision of access to continuing care resources is vital to the success of the program. Seventy one ERAS patients received 40-60 minutes of preoperative ostomy education with the “World” ostomy nurse practitioner using a variety of tools to facilitate auditory, visual, and hands-on learning preferences. An ostomy replica model and photos of stomas were used to give real ostomy visualization. Patients were provided with a pouch toolkit to allow for hands-on demonstration and return demonstration of ostomy pouch preparation and care. A chart review was performed retroactively to assess if any of the 71 study participants contacted the “World” ostomy nurse practitioner postoperatively via phone call or clinic visit to address an encountered ostomy problem or concern during the study window of January – September 2019.

Figure 1. Seen on visit “full thickness peristomal wound”



Results

In this institutional study;

- Of the 71 patients seen in the ERAS clinic, 66 patients had colorectal surgery resulting in ostomy placement.
- Fifty-three percent of patients were seniors, over the age of 60, demonstrating a potentially vulnerable population.
- Fifty-four percent of the new ostomates utilized the “World” ostomy nurse practitioner via phone or clinic visit (*figure 1*) with problems that would have otherwise resulted in a potential emergency room visit and possible readmission for hospitalization.

Outcome

The results of this study statistically support enrollment in the ERAS program to provide new ostomates with preoperative education, support, and resources to increase independence in ostomy self-care; resulting in decreased overall post-operative emergency room visits and consequential hospitalization.

Looking Ahead

Further chart review, data collection and analysis will be performed evaluating the rate of ostomate hospital readmission rates compared to pre-ERAS patient population data, in an effort to evaluate overall economic evidence for ERAS program enrollment.

References

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