

Implementation of a structured information transfer checklist improves postoperative data transfer after congenital cardiac surgery

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Context

With patient transfer from one unit to another, it is of prime importance to convey a complete picture of the patient's situation to minimize the risk of medical errors and to provide optimal patient care

Objective

To test the hypothesis that implementation of a standardised checklist used during verbal patient handover could improve postoperative data transfer after congenital cardiac surgery

Design

- Prospective, pre-/postinterventional clinical study
- Approval ethical committee
- Forty-eight patients younger than 16 years undergoing heart surgery

Interventions

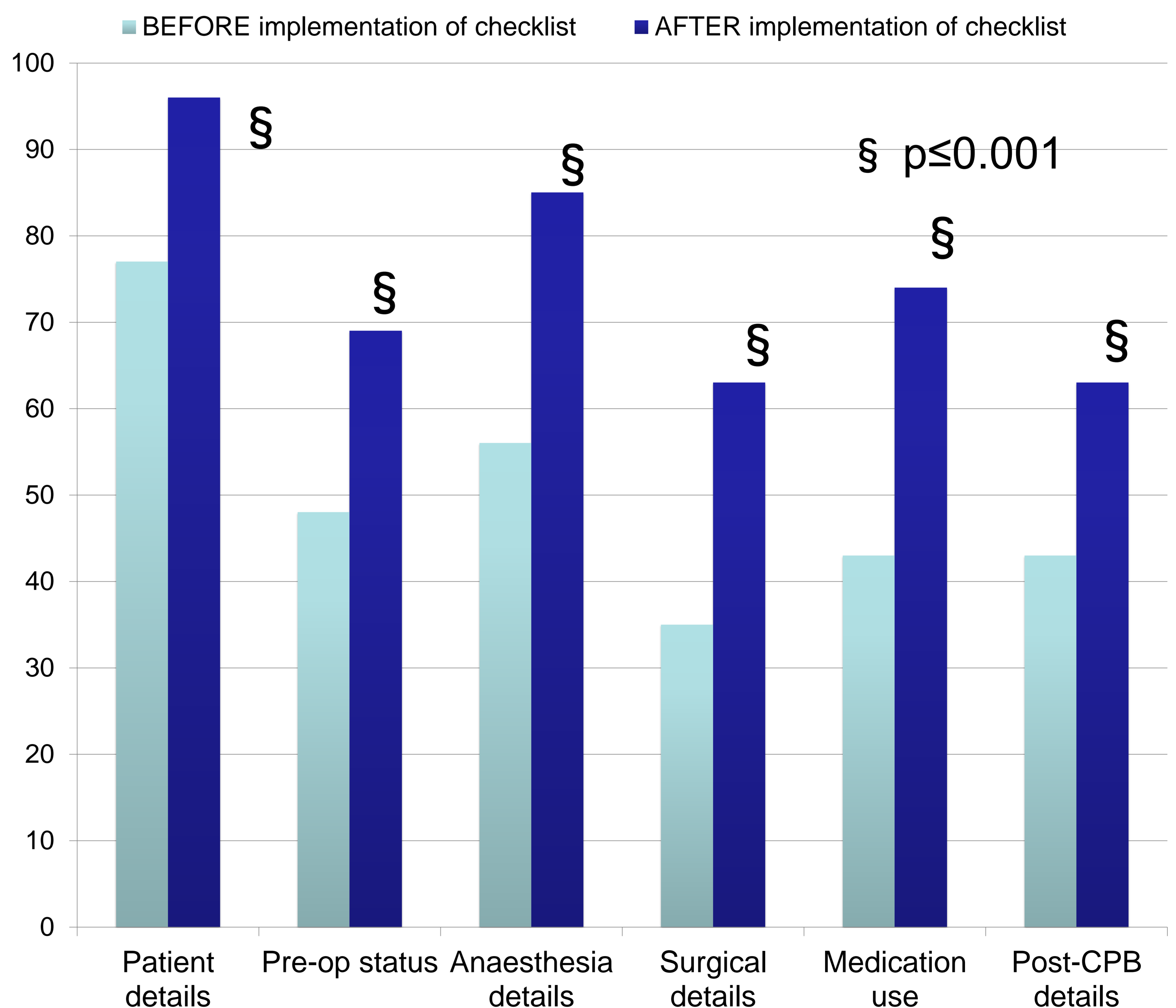
A standardised CHECKLIST was developed containing all data that according to the investigators should be communicated during handover of a paediatric cardiac surgery patient from the operating room to the intensive care unit

Main outcome measures

- Data transfer during the postoperative handover BEFORE and AFTER implementation of the checklist
- Duration of handover, number of interruptions, irrelevant data and confusing data
- Assessment of the handover by using VAS

Results

- After implementation of the information transfer checklist, the overall data transfer increased from 48% to 73% ($p < 0.001$)
- The duration of data transfer decreased from a median of 6 min (range 2-16 min) to 4 min (range 2-19 min) ($p = 0.04$)
- The overall handover assessment by the intensive care nursing staff improved significantly ($p = 0.004$)



CONCLUSION

Implementation of an information transfer checklist in postoperative paediatric cardiac surgery patients resulted in a more complete transfer of information with a decrease in the handover duration