



# Improving collaborative communication in co-managed hospitalist and orthopedic operative patients



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## BACKGROUND

- Communication deficiencies were noted between the internal medicine and orthopedic teams in co-managed patients with regards to optimization for surgery
- Studies have shown improvements in patient mean hospital length of stay, complication rates, and 30-day readmission rates for patients undergoing total knee and hip arthroplasty, when co-managed with hospitalist and orthopedic teams<sup>1</sup>
- Other studies have demonstrated co-management with hospitalist team results in significant decrease in length of stay and time to surgery for hip fracture patients<sup>2</sup>

## OBJECTIVES

- Determine the current effectiveness of communication between the orthopedic and medicine teams
- Develop an electronic medical record (EMR) template which includes pertinent information regarding perioperative optimization requirements (Smartphrase) and would be incorporated into history and physical (H&P) and consult notes upon admission
- Evaluate effect of “smartphrase” implementation on interdisciplinary communication and perioperative patient care

## METHODS

- Performed survey of internal medicine and orthopedic residents to assess baseline satisfaction with communication between the internal medicine and orthopedic teams regarding perioperative patient care
- The internal medicine Smartphrase included information regarding medical optimization such as Gupta Cardiac Risk, Revised Cardiac Index, Gupta Lung Injury Risk, current anticoagulation status, and additional tests required prior to surgery
- The orthopedic surgery Smartphrase included anticipated surgical timing, diet recommendations prior to surgery, postoperative weight bearing status, and postoperative DVT prophylaxis
- Each Smartphrase was implemented for 3 months
- A post-implementation survey was obtained to determine the effectiveness of each Smartphrase on perioperative communication between these co-managed patients.

## RESULTS

Figure 1. How satisfied are you with the current communication between the Orthopedic and IM teams regarding patient readiness for surgery?

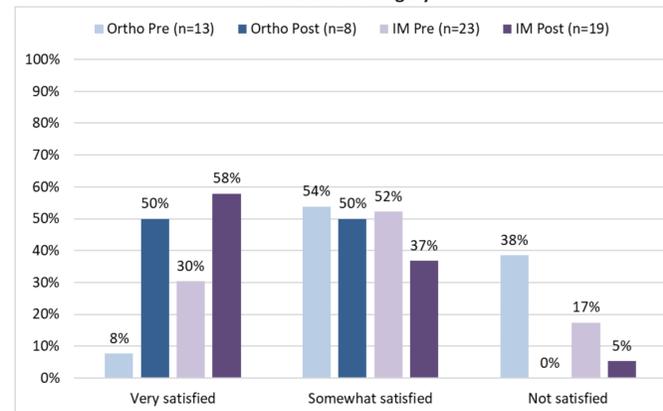


Figure 2. How frequently do you run into problems trying to tell if a patient is optimized for surgery?

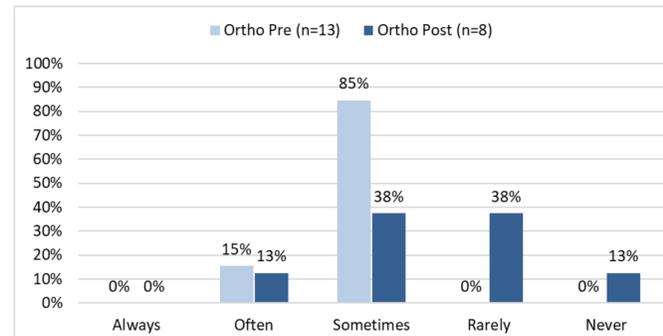


Figure 3. How frequently do you document in your notes whether an orthopedic surgical patient is optimized for surgery?

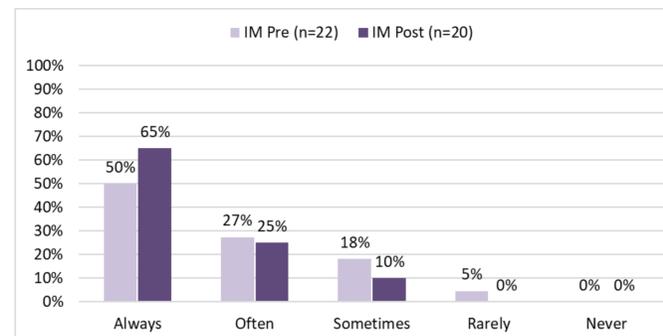
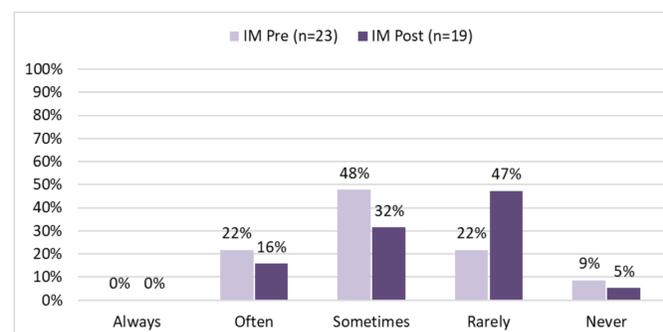


Figure 8. How frequently do you run into problems trying to understand orthopedic recommendations for a surgical patient post-operatively?



## CONCLUSIONS

- Significant shift in satisfaction from pre-implementation to post-implementation (p = 0.01 from Fisher’s Exact Test)
- Post-implementation of Smartphrase demonstrated improvement in overall communication between orthopedic surgery and internal medicine teams in co-managed patients
- Inclusion of relevant information for perioperative patients improved within documentation for each team
- Survey responses:
  - “Keep this dot phrase because it works”
  - “Improved instruction for dressing changes for SNF d/c”
  - “There have been improvements in the communication pre-operatively, but not peri-operatively or post-operatively. If they had our cell numbers, I’m sure communication would improve”

## FUTURE IMPLICATIONS

- Recommend larger sample size and longer duration of time for Smartphrase implementation
- Formalized post-operative sign off between teams
- Improvement in access for verbal communication between teams

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