

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/clinicians-roundtable/optimizing-surgical-wound-outcomes-a-focus-on-evidence-based-care/35841/>

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Optimizing Surgical Wound Outcomes: A Focus on Evidence-Based Care

Announcer:

This is *Spotlight on Wound Care* on ReachMD. On this episode, we'll hear from Ms. Kara Couch, who's a wound care certified nurse practitioner, the Director of Wound Care Services at George Washington University Hospital, and an Associate Research Professor of Surgery at the George Washington University. She'll be discussing quality metrics and outcomes in surgical wound care. Here's Ms. Couch now.

Ms. Couch:

When it comes to surgical wound care, as far as the successful outcome, the most obvious when it comes to mind is the wound closes, and the patient doesn't have any challenges with that. So there's very basic comfort in knowing that the wound has progressed through healing and different benchmarks, like the two weeks after surgery, you're going to get your staples out; four weeks after surgery, you get your sutures out; and your wound stayed intact and went on to heal at that point. So those are some of just very basic outcomes that we have, but other maybe secondary outcomes would be that the patient's pain was improved. Say it's malodor. If it was, say, a cancer surgery, the tumor was removed as completely as possible. So those are some of the other really important outcomes that you can get from this.

I think that it really helps us to be laser focused on how to get the best outcomes so that patients can have surgery and not have a fear of the unknown or things that could possibly go wrong. We have standardized and gotten the process down to a science, so you really shouldn't have bad outcomes with those cases because we know what's going on.

Patient-reported outcomes are hugely important and really help us to guide improvements towards the patient experience. So a patient-reported outcome of pain control perioperatively, of getting better quality dressings over their incision so that they can take showers immediately afterwards and not have to wait two weeks because you have fear of getting their things infected, and looking at how we fit into their lifestyle—can they do their activities of daily living? Those measures are really important.

So working to optimize those types of patient-reported outcomes really does help when we fit it in, particularly around surgical wound healing because we don't want those patients to be readmitted into the hospital. And you can actually be penalized in a lot of areas now, particularly around postoperative complications. If you have, say, a surgical wound, dehiscence or infection within 30 days, that is something that not just hospitals pay attention to, but CMS and the payers also pay a lot of attention to.

I think documentation is one of the most critical things that we as healthcare providers must do because the old saying, "If you didn't document it, you didn't do it," proves true, and it really can help as a patient safety issue. For example, if you didn't properly document what was placed inside of a wound and someone didn't know, you could have a retained procedural item unintentionally, which can cause a massive problem for the patient later down the line. And that's why we have different checklists around these areas to ensure that everything is aligned as it should be and providers are following their processes.

We set ourselves up for success the more we talk about perioperative wound management. I spend a lot of time teaching nursing students, advanced practice provider students, such as nurse practitioners or physician assistants, and residents—medicine and surgery included—because everybody needs to have at least some basic knowledge of wound care. Using old dressings, such as gauze, which have been around for forever, they are not standard of care. We can do better for our patients, and we should do better for our patients, and that involves using evidence-based wound care practices and the highest quality medical grade dressings that we can for our patients to help optimize them for success.

Announcer:

That was Kara Couch talking about how we define success in surgical wound care. To access this and other episodes in our series, visit *Spotlight On Wound Care* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!