





Jackie Ng
Angeline Loh
Ong Lay Teng
Chia Soon Noi
A/Prof Low Yee
A/Prof Kevin Lim

Aim

Improve operating theatre utilisation by allowing open access listing across disciplines three working days prior for listing of elective cases.

Methodology

Objectives, principles and guidelines were articulated and shared with surgical Heads of Department and lead nurses from the specialist outpatient clinics. Division leadership were personally involved in the dissemination of this new workflow, and the buy-in process.

Principles and guidelines

Schedule					
For the regular week:					
If your list is on	Your list is open from preceding	If Today is	You can book on		
Mon	Wed	Wed	Thurs, Fri, Mon		
Tue	Thurs	Thurs	Fri, Mon, Tue		
Wed	Fri	Fri	Mon, Tue, Wed		
Thurs	Mon	Mon	Thurs, Fri, Mon		
Fri	Tue	Tue	Wed, Thurs, Fri		
# Sat, Sun,	PH excluded.				

Monitoring by OT/Listing Staff

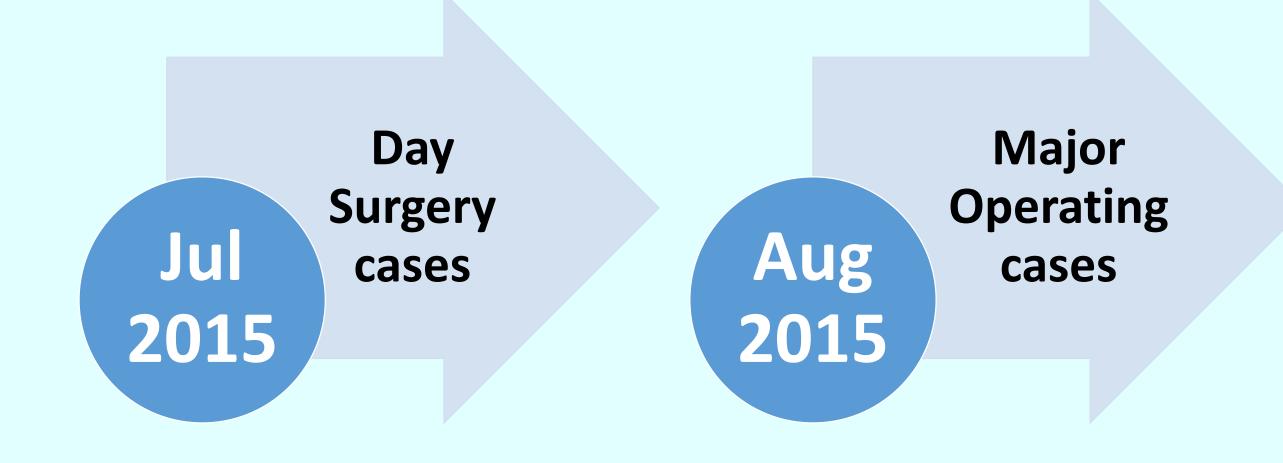
OT to monitor

- OT start time in each OT and by Specialty
- Reasons for late start (from listing time: why and whom)
- Patient in and patient times
- Knife to Skin and Skin closure times (Op time)
- Induction and Reversal time
- Turnover time

Listing Rooms to monitor

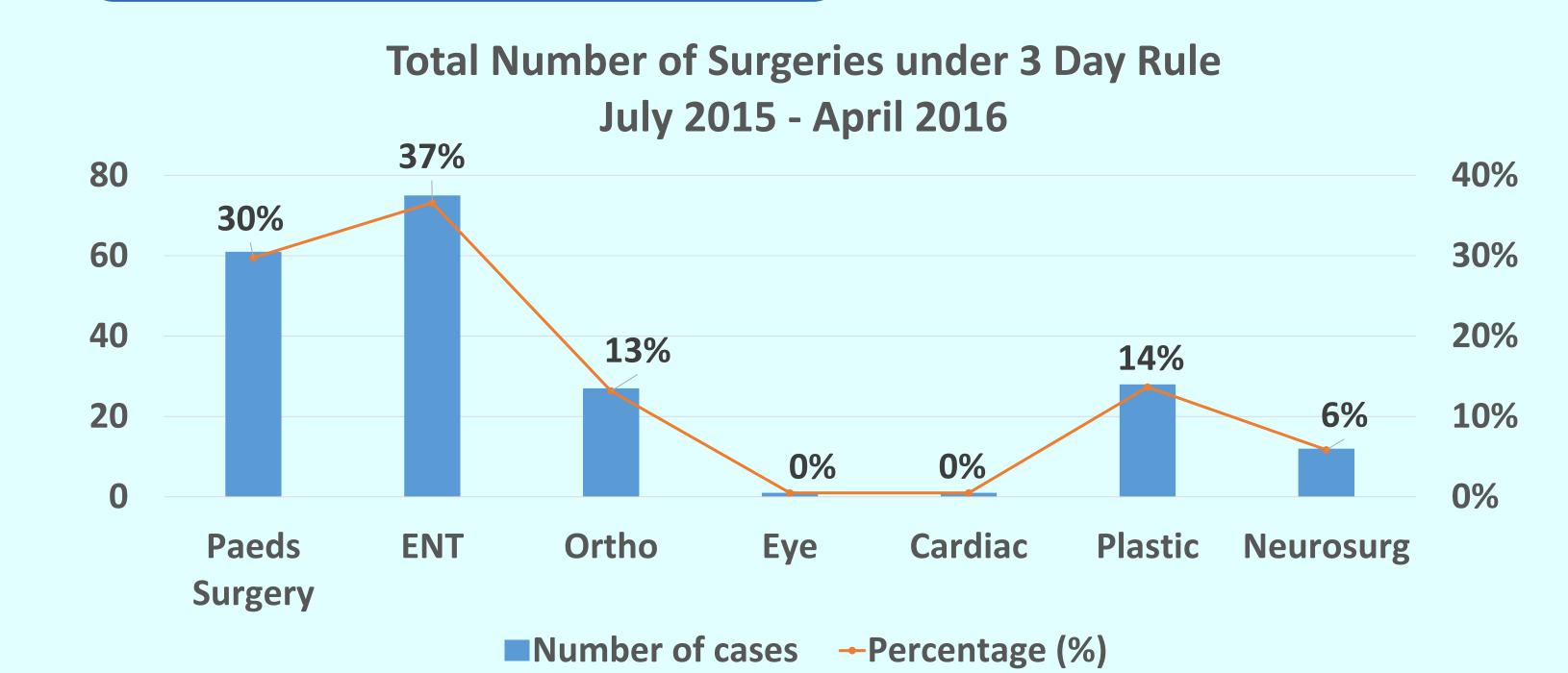
- Difficulties encountered by surgeons trying to list
- Difficulties in listing

Implementation



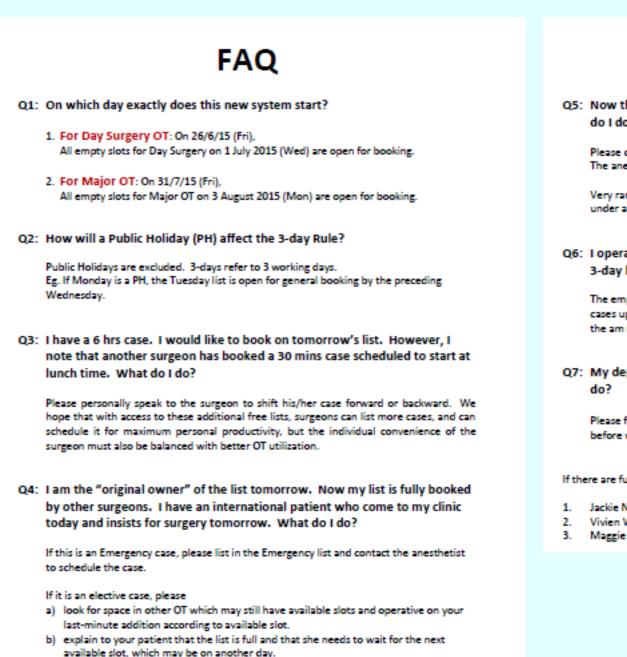
OT management were tasked to record any issues or difficulties faced in the initial months after implementation.

Results



Discipline/No of cases	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	TOTAL
ENT	10	9	8	15	10	3	8	6	2	4	75
Paeds Surgery	0	3	4	8	3	4	9	7	7	16	61
Plastic	3	1	0	8	3	2	4	4	1	2	28
Ortho	2	8	4	0	1	0	3	5	3	1	27
Neurosurg	0	0	0	2	1	3	2	1	1	2	12
Eye	0	0	0	0	0	1	0	0	0	0	1
Cardiac	0	0	0	0	0	0	0	0	1	0	1
TOTAL (Month)	15	21	16	33	18	13	26	23	15	25	205

Frequently asked Questions



Do note that the hospital "owns" the resources of an OT and there are no individual

FAQ Q5: Now the elective list is all fully booked. I have an emergency case. What Please call OT reception to list your emergency case and inform the anesthetist on call. The anesthetist will arrange. Sometimes space is available due to some cancellations. Very rarely, elective cases may have to make way for emergencies. This will be done only under absolutely necessary situations. Q6: I operate on the pm list. Now the am list is empty. Can I shift my case up 3-day before. The empty am list is open for everyone. You may instruct your listing nurse to shift your cases up if no one has booked yet. If others booked before you, they will have priority for Q7: My department usually finalizes our list by the day before. What shall we Please finalize your list at least 3 working days before. Empty slots 3 working days before will be open for free booking. If there are further questions or problems identified, please email to: Jackie.Ng@kkh.com.sg Vivien Wong Vivien.Wong@kkh.com.sg Maggie.Lim.PY@kkh.com.sg Maggie Lim

Conclusion

The 3-day rule is a readily adopted option for listing of elective surgical cases. With this new workflow, semi-urgent elective cases may be scheduled for surgery in a timely fashion, while at the same time improving operating theatre utilisation.