

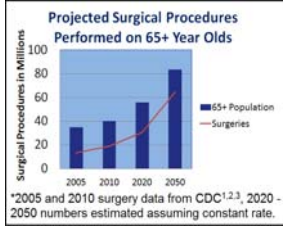
# Get Fit for Surgery: An Interdisciplinary Geriatric Surgery Wellness Program

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## Background

- In 2010, 51.4 million surgical procedures were performed in the US. 37% (19 million) were on persons ages  $\geq 65$ <sup>1</sup>.



- 20% of patients aged 70+ undergoing non-cardiac surgery will develop at least 1 serious post-op complication.
- Preoperative tailored exercises, nutrition plans, and anxiety reduction resulted in shorter lengths of stay and higher proportions of patient returning to pre-op baseline function<sup>4</sup>.

## Plan: Interdisciplinary Clinic + Health Coaching

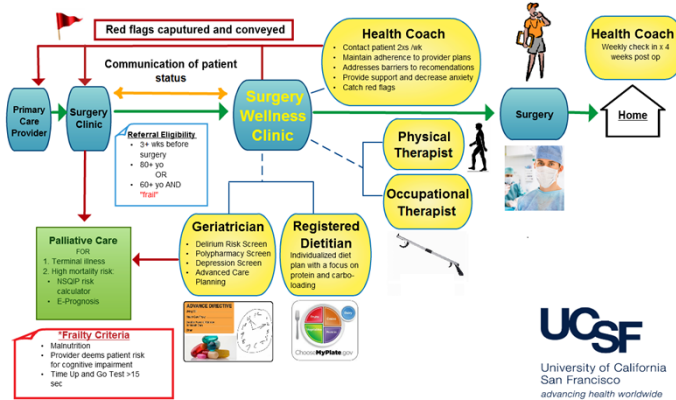
The Surgery Wellness Clinic (SWC) launched on February 24, 2015.

### During the Clinic Visit

- With a health coach, patients see 4 providers, 2 providers at a time: geriatrician/registered dietitian and physical therapist/occupational therapist.

### After the Visit

- Health coaches contact patients twice a week until surgery date and once a week after surgery to monitor patient status / recommendation adherence.



## Project Goal

### AIM:

- In 1 year, to optimize geriatric surgical outcomes by decreasing post-operative complications and by returning patients to baseline function within 8 weeks
- To decrease patient anxiety and to improve patient recommendation adherence

### Process Measures:

- Patient recommendation adherence
- Number of patient red flags/changes in status caught that affected the patient's trajectory of care
- Development of delirium

### Outcome Measures:

- Percent return to baseline
- Development of post-op complications
- Hospital length of stay

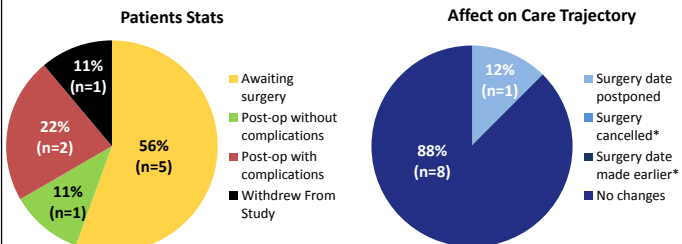
## Results / Progress to Date

**Baseline Patient Characteristics (N = 9), Goal = 400 patients in 1 year**

**Age:** 75  $\pm$  7 years

**Sex:** 44% Men, 56% Women

**Referrals from:** Ortho, vascular, hepatology, colorectal, & urology services



### Capturing Patient Experiences

#### Patient quotes on health coaching:

"I am not a disciplined person. Left on my own I would not follow these recommendations. But if you are in this with me, I am in this with you. I can do this with your help." – Patient

"What you are doing is more than health coaching, more than science. It is compassion, the heart and soul of medicine."  
– Anna Chang M.D. UCSF Associate Professor of Medicine

\*No surgeries have been cancelled and no surgery dates have been made earlier.

## Lessons Learned & Next Steps

- Having the patient see 2 providers at once allowed for more comprehensive data gathering, fluid handoffs, increased time efficiency while minimizing repetitive questioning of the patient.
- Personal health coach calls with patients pre and post op allowed for increased recommendation adherence, decreased patient anxiety, timely communication of key status changes, and continuation of care.
- No significant changes to complication rates to date.

### Next Steps

- Following up on post surgical patients and his/her caregivers to assess satisfaction, functional status, emotional status at 1, 2, 3, 6, and 12 months post discharge.
- Creating alternate pathways for the patient's care trajectory based on patient status changes.

## References

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