

Making Surgery Safer

- **SCIP Defined**

The Surgical Care Improvement Project (SCIP) is a national quality partnership of organizations committed to improving patient safety by reducing postoperative complications.

- **SCIP Goal**

The goal of the partnership is to reduce nationally by 25 percent the incidence of surgical complications by 2010.

- **SCIP Incentive**

Of the 40 million inpatient and outpatient surgeries that patients undergo each year, tens of thousands end up with associated postoperative complications. SCIP focuses on preventing complications in four areas that comprise 40 percent of the most common complications after major inpatient surgery: infection, blood clots, and adverse cardiac and respiratory events. These complications take a toll not only on the patients, but also on the overall cost of health care, increasing length of stay and hospital costs. A significant percentage of these complications are preventable.

- **SCIP Target Areas**

Surgical Site Infections account for 14-16 percent of all hospital-acquired infections and are among the more common complications of care.

Ways to prevent SSI:

- Administer prophylactic antibiotics within one hour prior to surgery.
- Select appropriate prophylactic antibiotics according to clinical guidelines.
- Discontinue prophylactic antibiotics within 24 hours after end of surgery.
- Control perioperative serum glucose in major cardiac surgical patients.

Adverse Cardiac Events are complications of surgery occurring in 2-5 percent of patients undergoing noncardiac surgery and as many as 34 percent of patients undergoing vascular surgery.

Ways to prevent adverse cardiac events:

- Administer beta-blockers to eligible major surgical patients who require chronic beta-blocker therapy.

Venous Thromboembolism Deep vein thrombosis occurs as deep vein thrombosis after approximately 25 percent of all major surgical procedures performed without prophylaxis, and pulmonary embolism occurs in 7 percent of surgeries conducted without prophylaxis.

Ways to prevent venous thromboembolism:

- Assess patient risk for VTE and administer appropriate perioperative prophylaxis.

Post-operative Pneumonia occurs in 9-40 percent of patients and has an associated mortality rate of 30-46 percent.

Ways to prevent respiratory complications:

- For major surgical patients on a ventilator, the administration of peptic ulcer disease prophylaxis and timely ventilator weaning is recommended.

- **SCIP Partnership**

This innovative partnership is guided by a steering committee comprised of representatives from 10 national organizations: the CDC, CMS, ACS, AHRQ, AHA, ASA, AORN, VHA, IHI and JCAHO. The SCIP partnership believes that a meaningful reduction in complications requires that surgeons, anesthesiologists, perioperative nurses, pharmacists, infection control professionals, hospital executives and patients work together to make surgical care improvement a priority.

- **SCIP Launch**

Initial planning for the SCIP Partnership began in 2003. SCIP was launched to providers in 2005 and then to consumers in 2006. The Partnership continues to work with technical expert panels and many other supporting partners to achieve the goal of this multiyear health care quality improvement initiative.

For more information, visit the SCIP web site at www.medqic.org/scip.

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