

Patient Care Experiences with Anesthesia Based on an Outpatient and Ambulatory Surgery Survey

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Background

- The Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery Survey (OAS CAHPS) measures patients' care experiences at Medicare-certified hospital outpatient departments (HOPDs) and ambulatory surgery centers (ASCs)
- These surveys are crucial for assessing patient perspectives, safety, and the overall quality of care (Bello et al., 2023; Bland et al., 2022; Mesrobian et al., 2019).
- Assessing quality of care through OAS CAHPS is becoming increasingly important, as the Centers for Medicare and Medicaid Services (CMS) recognizes CAHPS as the gold standard for measuring patient experience (Bello et al., 2023; Bland et al., 2022; Mesrobian et al., 2019).

Problem Statement & Aims

- A large regional medical group in Southern California has collected OAS CAHPS data across 29 HOPDs and ASCs but has not yet performed a comprehensive, region-wide analysis.
- To conduct a secondary analysis of OAS CAHPS data to evaluate patient care experiences related to anesthesia from 2020 through quarter 1 of 2025.
- To develop practice recommendations for anesthesiology providers, informed by both the study findings and current literature.

Review of Literature

Limits & Criteria

- Peer-reviewed articles in English, Published 2010–2024, Adult patients (average ≥18 years), Searches conducted: March & September 2024

Summary of Literature

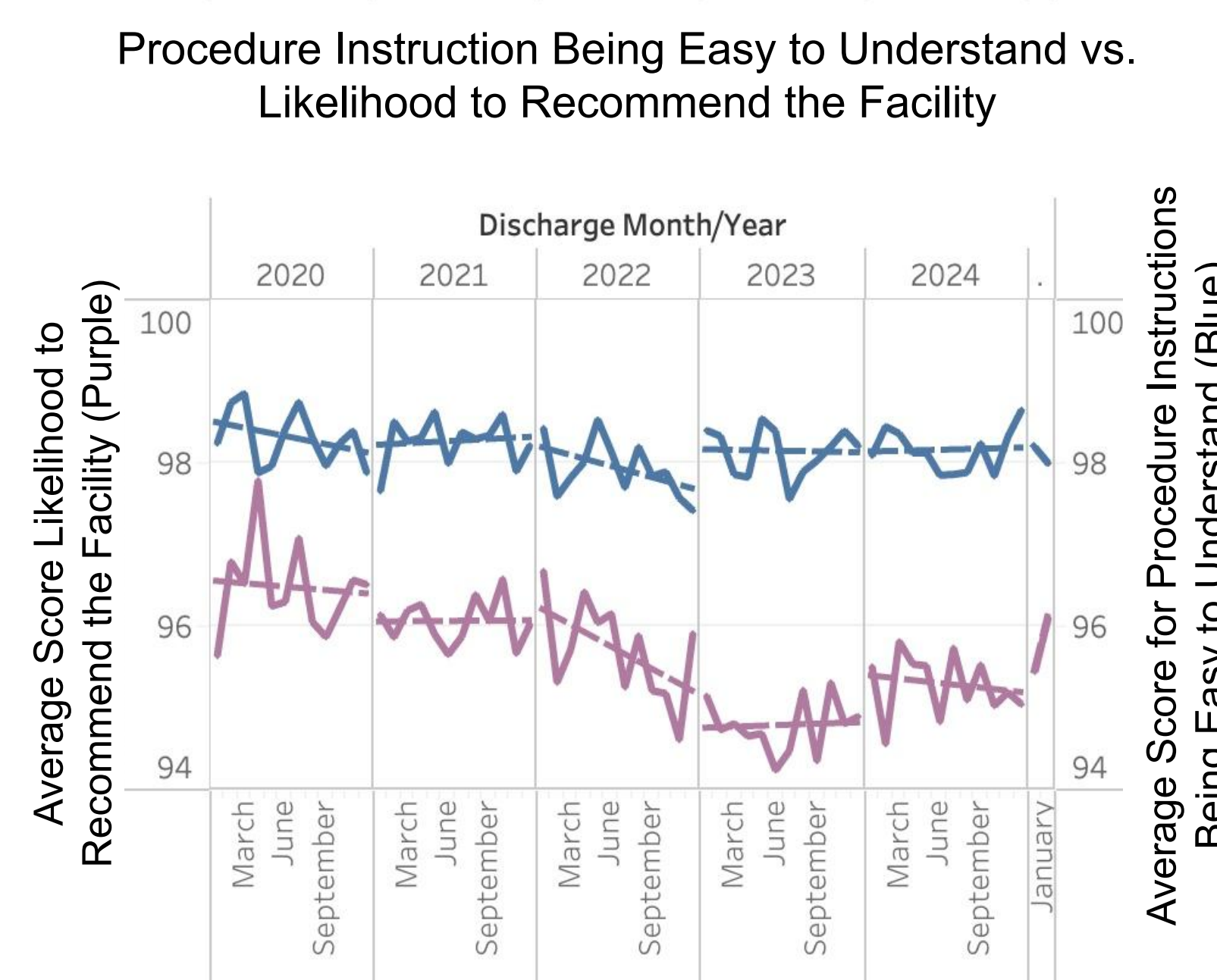
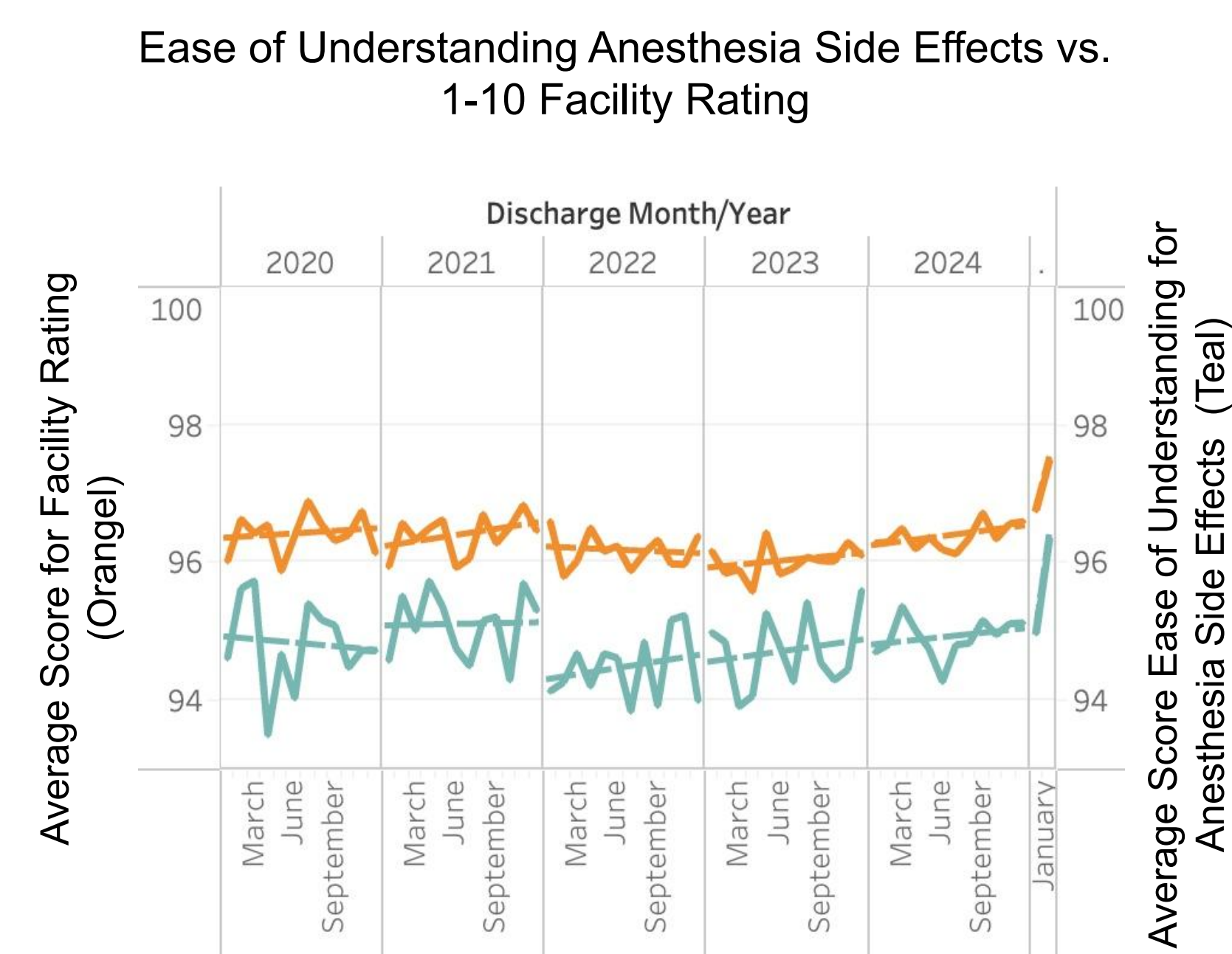
- Higher patient satisfaction correlates with higher quality of care and increased revenue for anesthetic services from CMS
- Increased patient satisfaction with:
 - Decreased postoperative nausea and vomiting (PONV)
 - Improved postoperative pain control
 - Increased shared decision-making between the patient and providers
- No comprehensive studies, conducted in the United States, examining OAS CAHPS survey results in relation to patient satisfaction with anesthesia care.

Methods

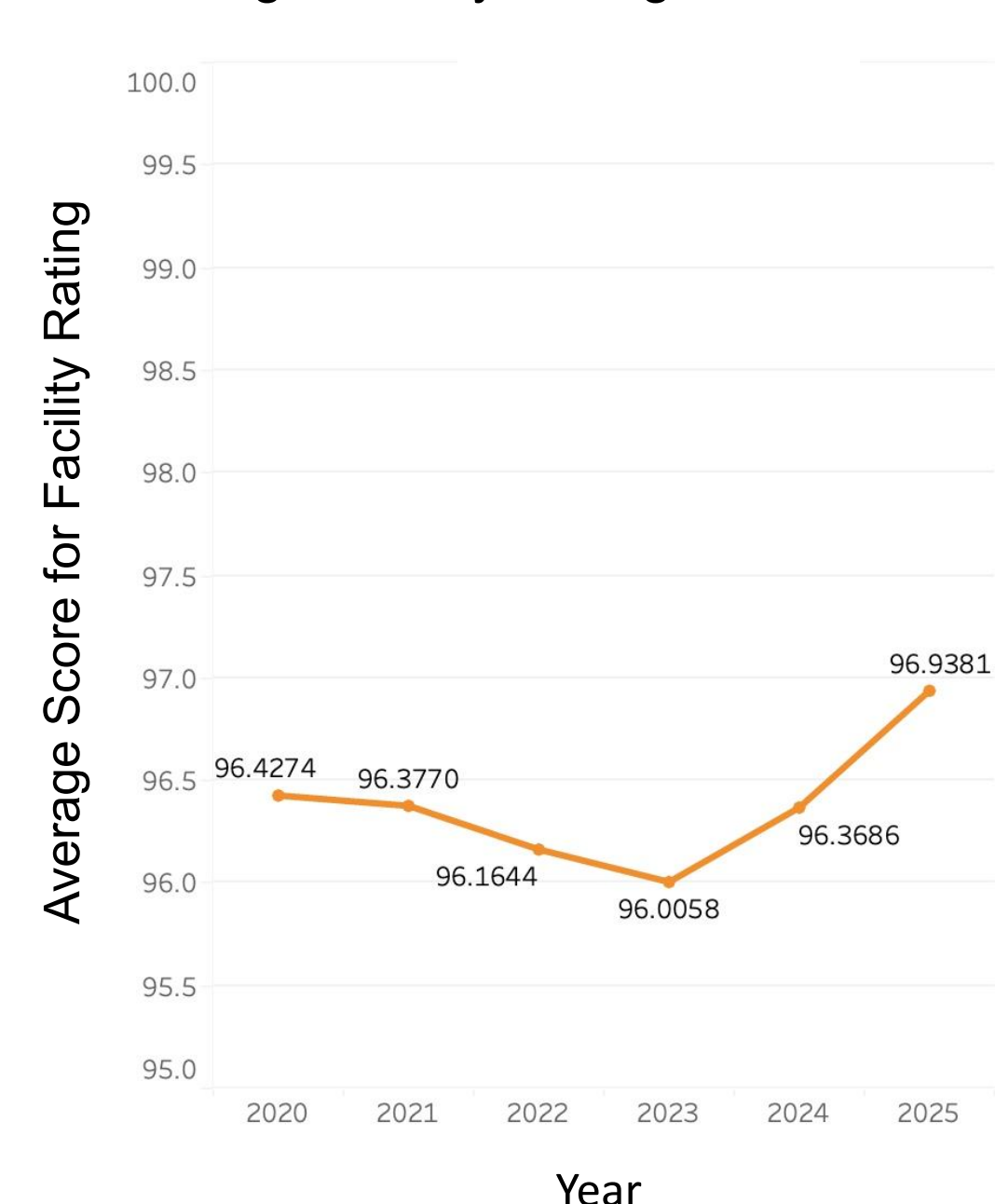
- A total of 76,919 OAS CAHPS surveys were collected from adult patients who received anesthesia between 2020 and Q1 2025 across 29 HOPDs and ASCs
- The analysis focused on survey questions that addressed whether procedural information was easy to understand, whether the anesthesia plan and potential side effects were clearly explained, whether information was provided regarding postoperative pain and nausea, the overall rating of the facility, and the likelihood of recommending the facility
- Responses were converted to numerical values using a linear mean scoring system and averaged by question.
- Correlational analyses were then conducted to examine the associations between the clarity or ease of understanding of information and both overall facility rating and the likelihood of recommending the facility.

Results

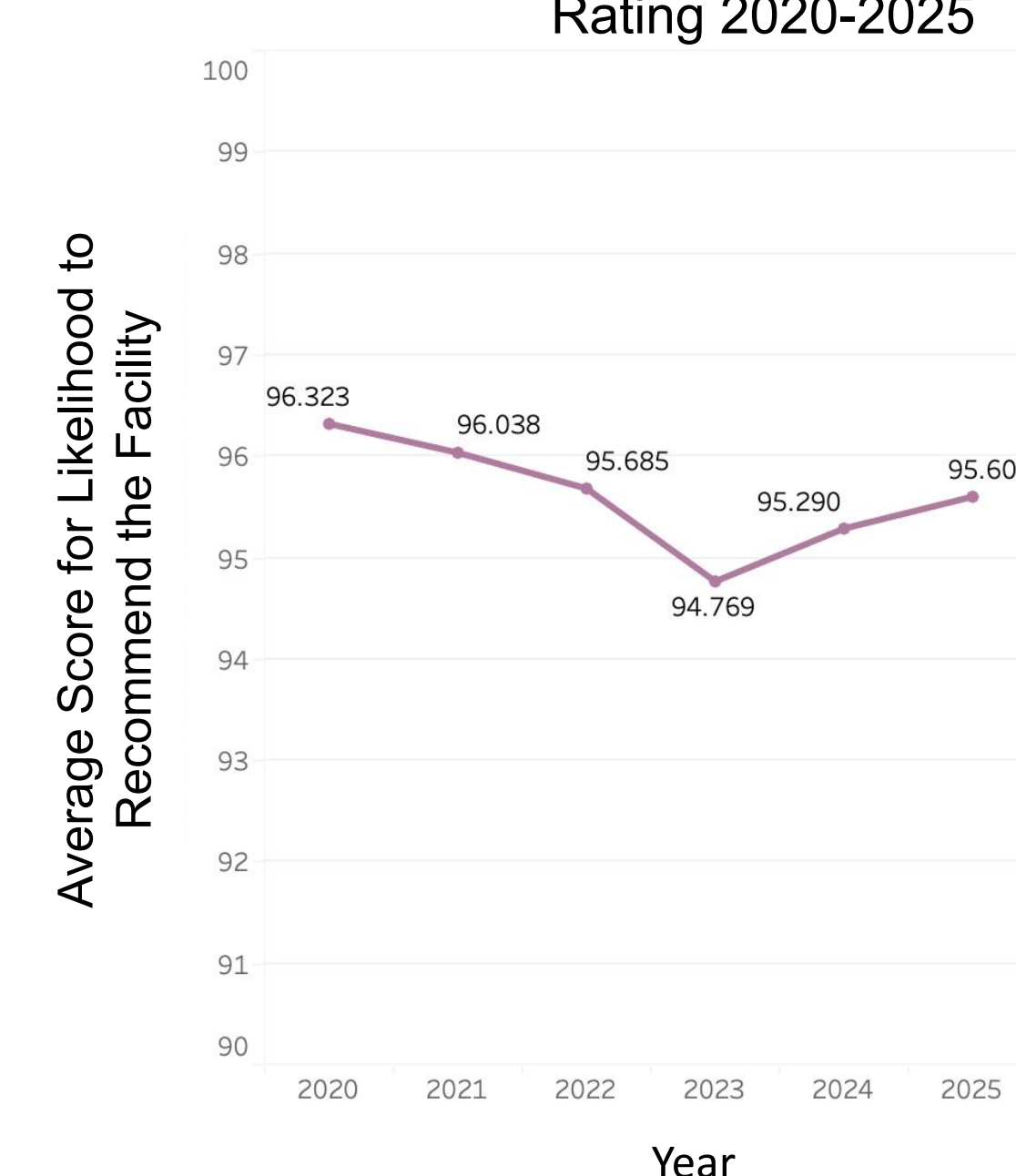
- The regional medical group achieved consistently high patient-reported outcomes across all facilities, with an average overall facility rating of 96.28 (SD = 8.38) and an average likelihood of recommending the facility of 95.58 (SD = 15.01)
- Correlational analysis revealed small but significant associations between all independent variables (ease of understanding procedure instructions, understanding of anesthesia plan, understanding of anesthesia side effects, and education provided about postoperative pain and nausea) and the dependent variables (facility rating and likelihood to recommend the facility).
- The strongest correlation with facility rating was clarity regarding anesthesia side effects (Spearman's Rho = 0.247). For the likelihood of recommending the facility, the strongest correlation was whether procedure instructions were easy to understand (Spearman's Rho = 0.241).
- The lowest average ratings for both facility rating and likelihood to recommend the facility were in 2023.



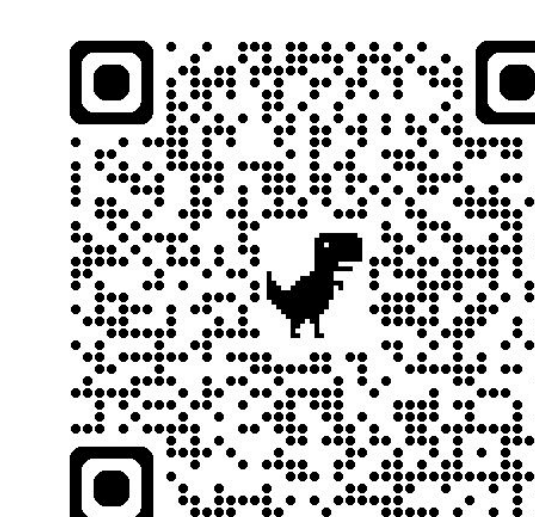
Average Facility Rating 2020-2025



Average Likelihood to Recommend the Facility Rating 2020-2025



For full results



Conclusions & Recommendations

- This study supports the existing literature, which demonstrates that effective patient communication, shared decision-making, provider interpersonal skills, and enhanced patient understanding are key drivers of patient satisfaction (Bello et al., 2023; Mesrobian et al., 2019).
- Structured educational strategies—such as the teach-back method—when implemented in both the preoperative and postoperative phases, may improve patient comprehension, reduce anxiety, and enhance overall satisfaction scores (Bello et al., 2023; Lai et al., 2021).
- The lowest average year was 2023. This could be due to high staff turnover during the COVID-19 pandemic, inability to see physicians, or high rates of staff burnout (Bulgarella, 2005; Coleman, 2024; Effler, 2023).
- Highest performing facility (average ratings of 97.69) reported standardized discharge instructions, culture that focuses on patient safety, empathy, teamwork, and collaboration (J. Fontanilla, personal communication, August 7, 2025)
- Lower performing facilities tended to be tertiary referral centers handling high-risk surgeries with higher complexity. (American Society of Anesthesiologists, 2020b)

Acknowledgments

We want to thank our advisors, Dr. Gabot and Al-Majid, for their constant guidance and encouragement through this DNP process. We would also like to thank the entire KP Quality Data, Analytics, and Reporting team, specifically Shima Motoyama and Jay Zhang, for their collection and presentation of the OAS CAHPS data, as well as and for answering our numerous questions throughout this process.

References

