Handoffs and Transitions in Critical Care  
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This summer, I worked on Handoffs and Transitions in Critical Care (HATRICC) under Professor Meghan Lane-Fall in the Department of Anesthesiology and Critical Care. This mixed methods research project focuses on standardizing patient handoffs from the operating room (OR) to the intensive care unit (ICU). Patients who are transferred from the surgery room to the ICU are often in the most critical and vulnerable condition. Studying patient handoffs are important because crucial information can be lost or altered in a handoff, which can cause preventable harm and mistakes.

I had several responsibilities in the project. My time was largely spent at the Hospital of University of Pennsylvania and Presbyterian Medical Center gathering quantitative and qualitative data by observing handoffs in various ICUs. During my observation shifts, I would pay very close attention to the patient board to see who was coming into the ICU after they had finished surgery in the OR. As soon as the patient arrived on the floor, I would gather my clipboard, arrive with the patient into the patient’s room, and check off several standards and information discussed in the handoff. For each handoff I observed in the ICU, I would answer observational questions, which would provide qualitative data. In addition, I learned how to “code,” labeling information from focus groups, interviews, and various transcripts for qualitative analysis.

By participating in HATRICC, I learned so much about what a good patient handoff looks like. Something very crucial for my future career as a nurse possibly in the ICU. I learned what to anticipate, what information should be prompted from the surgery team and ICU team, etc. How to do a proper handoff is often not taught in medical school or nursing school, so being able to learn through research has given me a priceless skill as a future nurse and hopefully nurse anesthetist.
PURM opened up opportunities for me to observe an array of medical careers by my constantly being in the hospital. I had the opportunity to shadow a nurse anesthetist and my PI who is an anesthesiologist. My shadowing experience solidified my future aspirations to go into anesthesia, specifically nurse anesthesia.