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Background on Patient Shadowing

The core building block of our healthcare system is **the patient**. In order to have a better understand of how to improve the healthcare system as a whole, viewing the system from a patient's lens can provide a **crucial perspective**.

Care setting: 50-year-old AA male for **ureter stents surgery**

Details of Care Experience: The patient for was **late** to his appointment. For this surgery, the patient needed someone else to drive him home, which may have added complications. The patient had two checkpoints through administrative staff. After checking-in, the patient was taken to a pre-operation room. He discussed his PMH and other relevant topics with a nurse, his anesthesiologist, and his surgeon. The visit took about 45 minutes from check-in to pre-operation.

Opportunities for Improvement: During the initial talk with the nurse, the patient discussed his allergies (he had none). However, after the patient was in the beginning stages of **drowsiness**, the anesthesiologist came back **to clarify about his allergies**. The doctor saw something in his chart that may have indicated an allergy. The patient still denied, but he was so drowsy that I'm not sure he could have answered the question properly.

Recommendations: I would recommend that all **questions**, even the questions that exist just to double-check, should occur **before any sleep-inducing medications** are provided to the patient.

When **double-checking medication allergies**, healthcare providers should **ask before** the patients become **sleepy**.

