

Background

- The Physician Assistant (PA) role emerged within the Canadian military healthcare setting in 1984 and remains relatively new in the Canadian healthcare system
- The 1st Physician Assistant civilian programs were established in 2008
- The role of a PA has been well established in the United States since the 1960's with over 100,000 PAs who currently practice to date
- While PA's in the US, work in virtually every aspect of medicine, the approximate 500 practicing Canadian PAs mainly work in the areas of primary care, emergency medicine and more recently, surgical specialities
- The PA has been an integral part of the Acute Care Surgery (ACS) service at our hospital since 2014
- Our PA works 7:00-15:00, on weekdays. The role includes: surgical consults, daily rounds, acting as the liaison amongst the multidisciplinary team and families, and assisting in the operating room (OR)

Purpose

- This descriptive study focuses on the emergence of the PA role in an ACS team within an academic tertiary care centre in Canada
- Our review quantifies the contributions, skill set and program components of a successful ACS PA

Methods

- An ACS database was initiated in September 2016 and data collection is ongoing
- Data is prospectively collected on a daily basis regarding the following information:
 - Total Patient Encounters
 - Total Surgical Consults (Day, Night)
 - Total ACS Admissions
 - Total ORs
 - Total PA patient encounters
 - Total Family Meetings, and
 - Total Multidisciplinary Meetings

Results

Table 1: Total number of patient encounters, consults, and surgeries over 365 days

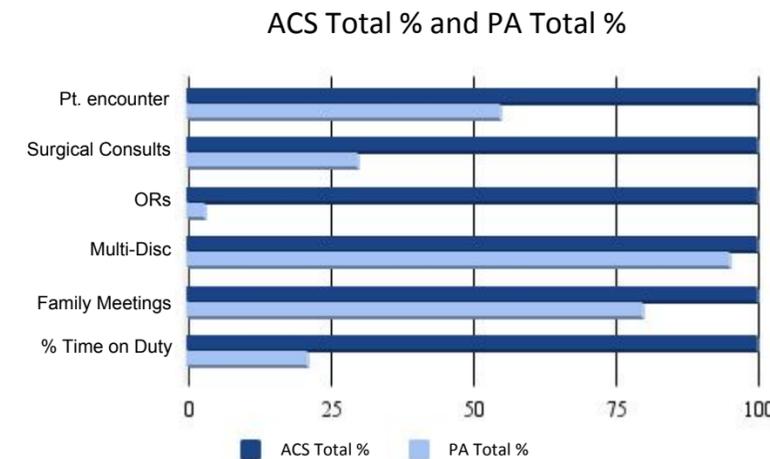
Variable	Total	Ave (daily)
ACS Surgical Consults	2205	6.01
ACS Surgical Consults (Day)	1026	2.79
ACS ORs	782	2.13
ACS Patient Encounters	11976	32.63

Results (cont.)

Table 2: PA participation in overall service volume over 365 days

Variable	Total
PA Surgical Consults	664
PA Patient (Pt) Encounters	6582
PA-attended Family Meetings	40
PA-led Multidisciplinary (Multi-Disc) meetings	88

Graph 1: Percentage of PA's contribution compared to overall team totals



Discussion

- The PA currently works daytime hours only, which equates to 21% of the total working hours during the study
- Despite this, the PA has been directly involved in 55% of patient encounters during the study period, 95% of encounters with patients with lengthy hospital stays and 96% and 80% of multidisciplinary and family meetings respectively
- In our teaching hospital, we have found that the PA is effective at managing the consult, ward patient care and patient flow if the staff surgeon and residents are in the OR, or unavailable due to academic responsibilities. As a result, the PA was only directly involved in 3% of the ORs.
- With appropriate communication and knowledge of patient plans, the PA is able to effectively manage the team, and implement patient health care decisions in a timely manner. This allows for more accessibility and consistency of care and less handover.
- At our institution, we have also advocated for medical directives for our PA, and this has further improved patient flow and patient care.
- Further research needs to be conducted to better understand the impact on the Staff Surgeon and Surgical Residents' workload and satisfaction, with the integration of the PA on the ACS team.