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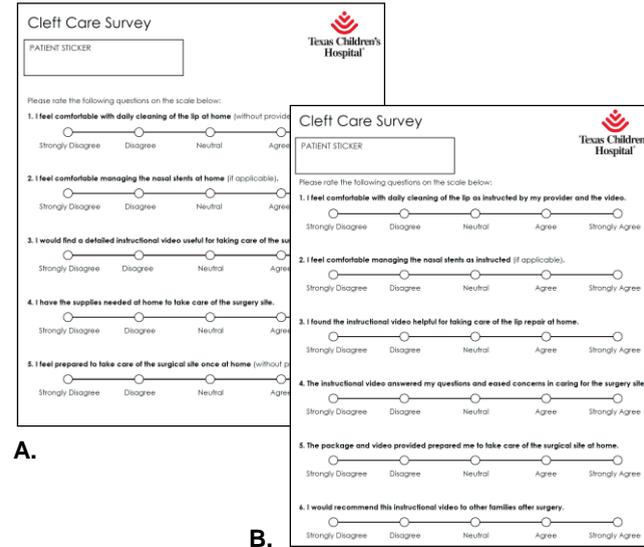
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## BACKGROUND

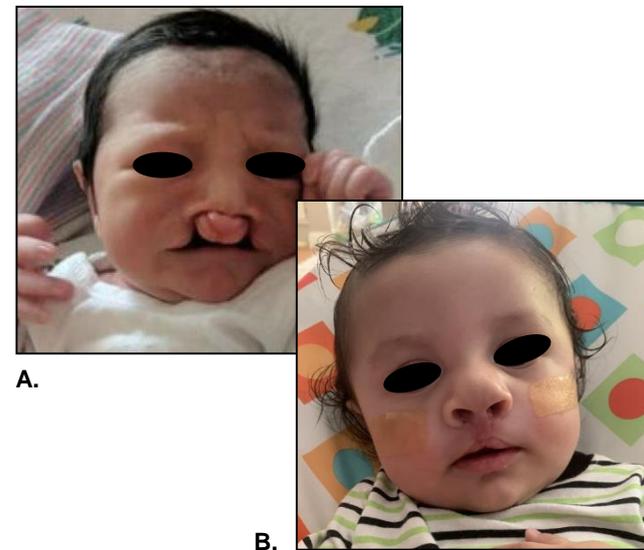
The Craniofacial Team of Texas Children's Hospital cares for numerous patients affected by a facial cleft. Cleft lip and palate is the second most common birth anomaly reported in the United States, affecting one in 690 births annually. Treatment for this facial difference requires several surgeries throughout the patient's lifetime. The first procedure is a primary cleft lip repair. Postoperative care is an essential component for the outcome of the repair. Given its importance, families are often overwhelmed by the process leading to premature discontinuation of care. To assist with this, our team produced a cleft care package that is provided at discharge. The package includes all needed supplies to care for the surgery site and an instructional video outlining at home care.

## METHODS

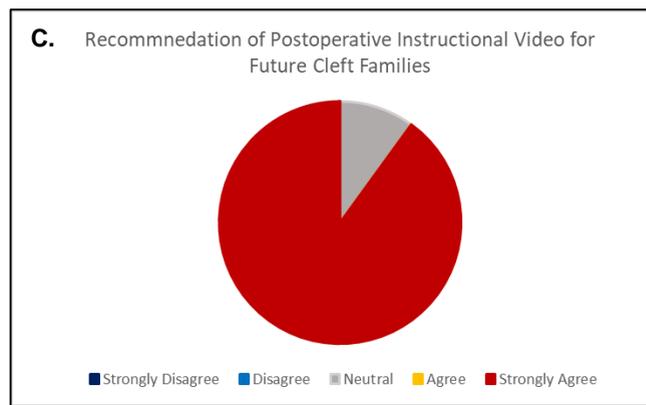
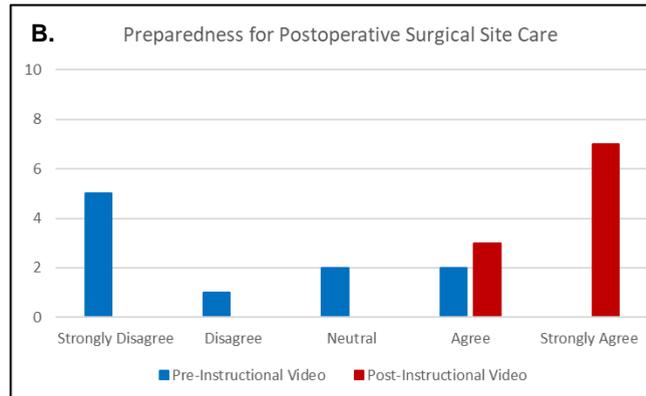
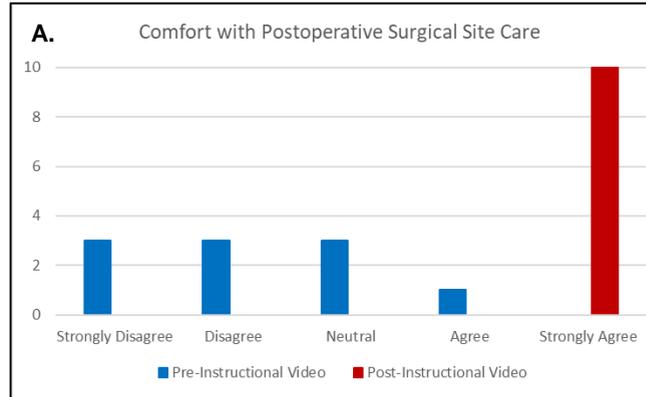
On the day of discharge families are asked if they would like to participate in the study. If families consent, packages are given prior to discharge. Packages include the following: written instructions for postoperative care with a QR code that guide families to the online video and all the supplies needed to fulfill care for the surgical site. On the day of discharge an advanced practice provider (APP) collects a survey that establishes baseline knowledge on how to care for the site prior to any instructions. After the survey has been collected the APP reviews the instructions and provides a demonstration on how to care for the repaired site. Assessment of scar healing, compliance with lip care and nasal stent use, comfortability of at home care, and family satisfaction is then evaluated at the patient's postoperative follow up, approximately 1-4 weeks after surgery. Data collected from the surveys are then analyzed using STATA software from StataCorp. A Wilcoxon signed-rank test is then performed to evaluate for statistical significance of all data.



**Figure 1:** Surveys utilized to assess families' comfortability and preparedness with caring for a surgical site pre- (A) and post-instructional video (B).



**Figure 2:** Patient whose caregiver received the package with supplemental video instructions and utilized resources once home to care for the surgical site. Photos taken preoperatively (A) and 2 weeks postoperatively (B).



**Figure 3:** Comparison of comfort level (A) and preparedness (B) for caring for a surgical site following a primary cleft lip repair pre- and post-instructional video,  $p$ -value = 0.0047 and 0.0069 respectively. Instructional video was well received with 90% of families recommending it as part of future cleft care (C).

## RESULTS

- The cleft care postoperative video project has been operational for approximately 6 months. We have had 10 families enrolled in this project to date.
- Our initial data that has been collected has shown that when families are given all the resources and tools needed to care for the surgical site postoperatively that level of comfortability and preparedness for daily care has improved,  $p = 0.0047$  and  $0.0069$  respectively.
- In addition, 90% of families would utilize such education in the future and recommend to future families as part of postoperative cleft care.

## CONCLUSION

The cleft care postoperative video project is still in its infancy, however, initial response from our families has been overwhelmingly positive. The subjects participating in this project have informed our team that the instructional video and supplies provided made them feel comfortable with their ability to care for their child's surgical site once at home. In addition, they would recommend the instructional video to future families following a primary cleft lip repair.

Our team believes with the development of the video and thorough explanation on how to care for the surgical site by our APPs our families are discharged home feeling confident with their ability to care for the patient. This thought has been confirmed with the initial responses received from our patients' families.

This empowerment of families to be proactive in patient's postoperative care will potentially lead to better outcomes of cleft care. We anticipate that with thorough teaching and continuation of providing adequate resources needed to future families our team will observe a higher compliance rate of lip care and nasal stent use following a primary cleft lip repair.



QR code provided at discharge that will link families to the online instructional postoperative cleft care video.