

Topic Search Strategy Paper: Enhanced Recovery After Surgery (ERAS)

Chamberlain University College of Nursing

NR449: Evidence Based Practice



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This paper marks the first step in a team project focused on evidence-based practice in surgical care. Specifically, this assignment will outline the systematic search strategy used to find two recent primary research articles on the effectiveness of Enhanced Recovery After Surgery (ERAS) protocols. By defining the problem, creating the clinical question using the PICOT framework, and detailing the search and refinement process, this paper lays the groundwork for a thorough review of this important practice area.

Clinical Question

Postoperative complications continue to be a major issue in adult surgery. They lead to significant illness, death, and costs for the healthcare system. Common perioperative care often includes long preoperative fasting, excessive intravenous fluid use, and delayed movement. These practices can unintentionally increase patient stress and lengthen recovery time. The risks tied to these traditional methods require a look at new, evidence-based strategies to improve patient outcomes.

The magnitude of this problem is documented by current literature: postoperative complications can affect between 15-20% of general surgery patients (Madan et al., 2023). This leads to increased readmission rates and significantly increases the average patient length of stay. This extended recovery not only puts pressure on hospital resources but also raises the risk of hospital-acquired infections and deconditioning for patients. Reducing these avoidable complications and speeding up recovery is crucial for improving patient outcomes and achieving cost-effective care. This collaborative work aims to explore evidence-based strategies, specifically ERAS protocols, to reduce these risks and enhance patient recovery across various surgical specialties.