

How do we best determine how many phase I PACU beds to construct and staff?

If you have not yet browsed the relevant section of the bibliography, I recommend that you start by [clicking here](#). If you will be performing construction that will result in large changes to patient flow, you should perform a discrete-event simulation. [Click here](#) for an example. For most hospitals, the modeling is straightforward, because it is not necessary to specify in detail how cases will be scheduled. [Click here](#) for details. Then, [click here](#) for the methods. For an example report, [click here](#) and go to the last page. If you have an existing facility and you want to right-size your staffing, [click here](#) for a review on preventing delays in admission into the PACU. If your phase I PACU has patients with a wide range of acuities (e.g., overflow from intensive care units), then [click here](#) for the corresponding methodology. [Click here](#) for information on services provided by the Department of Anesthesia, Division of Management Consulting, and [click here](#) for an example of a staffing analysis.

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