

PDSA cycle worksheet

Test small, test fast. One ward, one week, five patients.

Aim — what are we trying to accomplish?	By when	Cycle #

Example aim: “95% of patients out of bed ≥ 3 hours on POD 1, by the end of month 3.”

PLAN	
What exactly is the change?	
Who will do it?	
Where — which ward, which patients?	
When — start date and duration?	
What will we MEASURE, and how?	
What do we predict will happen?	

DO	
Run it small — one ward, one week, five patients	
What actually happened?	
What went wrong or surprised us?	
Did anything unexpected get in the way?	

STUDY	
Did the measure move? By how much?	
Did it match our prediction?	
WHY did the cases that failed, fail? (This is the most valuable finding.)	
What did we learn that we did not expect?	

ACT	
ADOPT — keep it as it is, and spread it	
ADAPT — change it and run another cycle	
ABANDON — it does not work; try something else	
What is cycle N+1?	

Why small and fast. A change tested on five patients that turns out to be flawed can be fixed on Tuesday. A hospital-wide launch that turns out to be flawed cannot be fixed at all — it can only be defended or abandoned.

The most useful thing in the STUDY box is not the number. It is the reason the cases that failed, failed. That reason is what the next cycle is built on.