

Building Capacity for Evidence-Based Practice within a Specialty Clinical Practice Environment

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Background/Introduction:

Significant recent patient safety events identified risk factors for obstructive sleep apnea (OSA) that were not consistently assessed for preoperatively. This prompted the post-anesthesia care units (PACU) Standards of Care (SOC) Council to question what was the best method to screen pre-operative patients for risk for OSA?

Purpose/Objectives:

The purpose was to determine the best method to identify preoperative patients at risk for obstructive sleep apnea.

Description of Methods or Procedure:

Nurses representing each of eight different PACUs are members of the PACU SOC Council. Prior to reviewing the literature, Council members and PACU unit staff completed on-line learning modules developed from the Johns Hopkins Nursing Evidence-Based Practice (EBP) model. Council members were assigned articles to read and review with their respective PACU unit staff. Each article was subsequently presented at Council meetings and leveled by consensus of the members.

Outcomes and Measurements of Results:

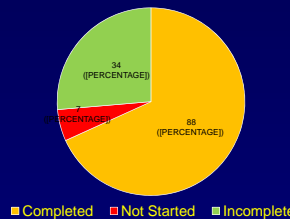
After leveling the evidence, the Council made recommendations for practice standards for preoperative risk assessment. Patients identified as being at risk for obstructive sleep apnea (OSA) are monitored during PACU phase of care and outcomes measured as to positive predictive criteria for difficulty with post-operative airway management.

Implications for Nursing and Lessons Learned:

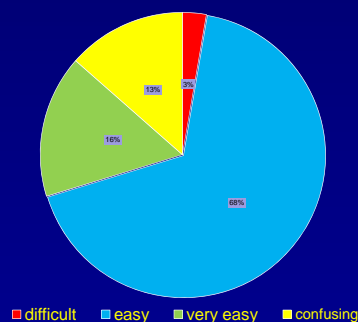
Conducting the EBP project promotes nurses scientific inquiry into future nursing research. EBP knowledge and skills were evaluated at the end of the project.

Education of Nursing Staff

Completion Status of Nursing Staff for EBP Modules



How easy or difficult were the five EBP modules to understand?



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Reference:

Institute for Johns Hopkins Nursing, Poe, S.S. and White, K.M., Johns Hopkins Nursing Evidence-Based Practice: Implementation and Translation, STTI, 2010.

