HOW WE BUILT AN OBSTRUCTIVE SLEEP APNEA (OSA) PROGRAM
AT A SMALL RURAL HOSPITAL
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Background Information: The potential risk of adverse effects from OSA, known or suspected, potentiated by surgical anesthesia was recognized. Sauk Prairie Healthcare (SPH) decided to assess for this risk factor and create a policy and protocol for the specific needs of this patient population.

Objectives of Project:
1. Promote safe and consistent care of our adult surgical patient.
2. Assess all surgical patients for known, or suspected, OSA.
3. Implement the OSA policy and protocol for the identified patients.

Process of Implementation: ASPAN and ASA recognize that it is best practice for every surgical department to have an OSA policy and protocol in place. With the approval of Senior Leadership, a multidisciplinary team was formed. An internal study was conducted, using an OSA assessment tool, which verified that 33.8 % of our surgical population had known or suspected OSA. Through review of literature for evidenced based practice, we developed a policy and protocol titled “Perioperative Management of the Surgical Patient with known or suspected Obstructive Sleep Apnea”. An assessment screen and an order set were built for our electronic health record, which included the OSA policy and protocol. Patient education material was developed. Standardized staff education was provided. Staff and providers were notified of the implementation plan through presentations and medical staff bulletins.

Statement of Successful Practice: Early recognition of patients with known or suspected OSA and implementation of our policy which follows the patient throughout their hospital stay has enabled SPH to add a layer of safety when caring for our patients. Education given in the hospital and at discharge will help our patients be better informed regarding their healthcare needs.

Implications Advancing the Practice of Perianesthesia Nursing: Utilizing the OSA policy and protocol will increase the vigilance needed for the specific needs of this patient population and therefore provide a safer perioperative experience.