

IMPROVING NURSING ADHERENCE TO THE TOTAL JOINT PAIN MANAGEMENT PROTOCOL

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Background: In the Post Anesthesia Care Unit (PACU), the Total Joint Regional Anesthesia Protocol (TJRAP) was implemented by the Acute Pain Service (APS) as a multimodal approach to improving outcomes and pain control in the total joint population. The implementation of the TJRAP occurred in the fall 2010. In January 2011, the APS believed that the nursing staff was not utilizing the TJRAP on the majority of patients. In spring 2011, an evidenced-based quality improvement project was implemented.

Objectives of the project: The purpose of this project was to evaluate and improve compliance in the use of the TJRAP to decrease patients' pain following surgery.

Process of Implementation: The plan to improve compliance with the TJRAP included: (1) surveying staff on barriers of using this protocol; (2) completing chart audits; (3) conducting a journal club; (4) educating staff on the protocol; and (5) reassessing compliance with a chart audit post education.

Statement of the Successful practice: The pre-education audits showed that 13% of patients got the pain protocol. The post education audits showed improvement, July 2012 56%, August 2012 29%, September 2012 44%, October 2012 38%, November 2012 24%, and December 2012 46%.

Implications for Practice:

Research has shown using total joint protocols significantly improve patients' pain control and satisfaction following total joint surgeries. Decreasing IV administration and early oral medication administration is a change of practice. Evaluation of practice and continued education are necessary to ensure a practice change continues.