

## **DO YOU KNOW THE FLOW?**

### **DEVELOPING AN ALGORITHM FOR POST OPERATIVE URINARY RETENTION**

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#### **BACKGROUND INFORMATION:**

Patients who receive anesthesia are at increased risk for developing postoperative urinary retention (POUR). These patients are at risk for bladder overdistention, urinary tract infections, and catheter related complications. A group of Post Anesthesia Care Unit (PACU) staff nurses met to focus on POUR as a quality improvement project since there is a large population receiving spinal anesthesia at our institution.

#### **OBJECTIVES OF PROJECT:**

The objective was to identify those at high risk for POUR. The goal was to develop an algorithm to intervene with bladder scanning or catheter placement as necessary.

#### **PROCESS OF IMPLEMENTATION:**

The group performed a literature search about POUR and determined inclusion and exclusion criteria. A random selection of 713 patients from the PACU were reviewed however, only 124 patients met criteria. The data was analyzed and an algorithm was formulated. The group educated the PACU staff on the results of the data and how to use the algorithm. The orthopedic population was identified as high risk which led to the opportunity to educate the nurses on the orthopedic unit. Two nurses volunteered to educate their staff.

#### **STATEMENT OF SUCCESSFUL PRACTICE:**

An additional literature search was done to identify current algorithms. Based on the data analysis, the group developed a new algorithm for POUR. The development of the new algorithm helped standardize nursing practice, interventions, while empowering staff nurses to identify patients at high risk.

#### **IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:**

An algorithm can decrease length of stay, risk of infection, risk of permanent detrusor (bladder) muscle damage, and increase patient comfort postoperatively. As a result, an algorithm can help with patient safety, patient and nurse satisfaction, and collaboration between nursing units.