PERIOPERATIVE PARTICIPATION IN OSA AWARENESS

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BACKGROUND INFORMATION:

Over 12 million Americans potentially have OSA (Obstructive Sleep Apnea) and this number is expected to increase. As symptoms are vague, patients frequently are unaware of their condition. Our institution is a Level One transplant/trauma center and performs over 140 surgeries a day. The use of narcotics and sedatives is prevalent and can place 'high risk' patients in a dangerous position. Our anesthesia department took a proactive approach and initiated a preoperative screening assessment to establish potential risk in surgical patients. Our division took a proactive approach at ensuring OSA protocols were strictly followed in the preoperative holding area and recovery room.

OBJECTIVES OF PROJECT:

Patients will be assessed for OSA risk status on admission to the perianesthesia area. When identified, communication of 'high risk' status will occur during handoffs.

PROCESS OF IMPLEMENTATION:

Many patients are preoperatively screened in our Center for Preoperative Assessment and Planning (CPAP) prior to surgery. Any patients not screened in CPAP are assessed by our preoperative nurses the day of surgery. The assessment includes data points such as: snoring, neck size, BMI, and previous diagnosis of OSA. If patients have an OSA diagnosis or are identified as 'high risk' our OSA protocol is initiated. The patients receive an arm band and a pre-made sign to hang above their bed to alert others. Standardized orders are placed in the charts. These include post-operative pulse oximetry monitoring after patients leave PACU, and instructions for positioning with the head of bed elevated. Recent updates include initiating telemetry with centralized pulse oximetry and transporting only with RN escort.

STATEMENT OF SUCCESSFUL PRACTICE:

Due to our proactive and intense prescreening efforts at all points of care, there is an increased awareness regarding OSA. Identification of patients in the peri-operative environment who have been diagnosed with obstructive sleep apnea and those that are at 'high risk' has increased, providing for better patient outcomes.

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

Patients with a high risk for OSA will be identified on admission and then managed safely throughout the hospital stay.