# ETCO2 MONITORING IN HIGH RISK PATIENTS IN THE PACU: A QUALITY IMPROVEMENT PROJECT

Team Leaders: Helen Taylor, RN, BSN, CPAN, Nancy Antin, RN, BSN, CPAN, CAPA
Abbott Northwestern Hospital, Minneapolis, Minnesota
Team Members: Julie Grandstrand, BS, RRT, Stacy Jepsen, MS, APRN, ACNS-BC, CCRN,
Sue Sendelbach, PhD, RN, CCNS, FAHA, FAAN, Donna S. Johnson, BSN, RN-BC,
Greg Veenendaal, MS, RN, CCRN, Lori Reiland, Manager Quality/Risk, Greg Morrissette, M.D.

### **BACKGROUND INFORMATION:**

Concerns regarding the many undiagnosed OSA patients that present for surgery daily

## **OBJECTIVES OF PROJECT:**

This project examined the impact of measuring end tidal carbon dioxide (EtCO<sub>2</sub>) by a capnography monitor on adult patients in the post-anesthesia recovery room (PACU).

# PROCESS OF IMPLEMENTATION:

A quality improvement project conducted a two- week pilot that examined 30 patients who were assessed for risk of sleep apnea pre-operatively using the STOPBANG questionnaire. Patients identified at risk had a capnography placed in the PACU.

### STATEMENT OF SUCCESSFUL PRACTICE:

Of the 21 patients identified at risk for sleep apnea, 71% were males with an average age of 57. General surgery (43%) was the most frequent surgical procedure followed by spine (38%) and other (19%).

95 % patients had abnormal EtCO2 values

0 % of patient had abnormal SPO2 values

81 % of patients had interventions noted

0% of patients had a Rapid Response Team call within 8 hours of PACU discharge

## IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

Identification of patients at risk for hypoventilation by capnography provides an opportunity for early intervention to mitigate adverse patient outcomes in adult patients in a PACU.

Future research should examine using the STOPBANG questionnaire routinely in the pre op setting.