IMPACT OF ALTERNATIVE THERAPIES WITH SURGERY AND ANESTHESIA

Team Leader: Elizabeth Rhodes RN BSN CNIII CMSRN

Duke University Medical Center Eye Center PACU-Durham, North Carolina

Team Member: Elizabeth Callis RN BSN CNIV CAPA

Background Information: Many patients that come for surgery take alternative therapies include herbal products, vitamins and supplements, based on their belief system or cultural background. Patients do not always inform their provider about these alternative therapies. As a nurse working in the Preoperative/Post Anesthesia Care Unit, I discovered that many of our patients were not including alternative therapies on their medication lists. The nursing staff had to enter the alternative therapies in the patient record on the morning of surgery or they were not getting recorded. This was a concern because as some alternative therapies need to be held more than 24 hours prior to surgery to prevent potential interactions. Alternative therapies can have a significant impact on a peri-anesthesia patient. It is necessary for PACU nurses to be knowledgeable in the indications for alternative therapies including the potential anesthesia and surgical complications to expect for the peri-operative patients.

Objective of Project:

- 1. To increase knowledge of the Duke Eye Center Nurses about the significant impact alternative therapies can have on our peri-operative patients.
- 2. To improve completeness of Medication Reconciliation
- 3. Increase compliance of patient holding (stopping) their alternative therapies as advised by the Family Nurse Practitioner (FNP)

Process of Implementation:

- 1. Informal literature review revealed a need for more patient and health care staff education.
- 2. **Development** and **delivery** of Power Point presentation to educate the Duke Eye Center PACU staff members of the different complementary and alternative therapies with a focus on use, actions, side effects and peri-anesthesia interactions, including recommendations on discontinuance prior to surgery. Also, to encourage staff to include medication reconciliation form.
- 3. Follow-up chart review to measure number of patients that held alternative therapies as instructed by the Physician Assistant (PA) or FNP during their pre-admission testing appointment.
- 4. Follow-up chart review to measure number of patients with alternative therapies documented on their medication reconciliation.
- 5. Follow-up survey with PACU Nurses done to evaluate their successful practice

Statement of Successful Practice:

A working knowledge was provided to Eye Center PACU nursing staff of the alternative therapies along with indications and anesthesia interactions. A nurse, PA or FNP reviewed medications with patients before coming to surgery and instructed them to stop certain ones within a recommended amount of time. This helps to prevent potential complications of

anesthesia. Medications were also reviewed the night before surgery by a registered nurse with the patient during their pre-op surgery telephone call. During these calls, if patient has a question on medications to hold they were reviewed individual

Implications for Advancing the Practice of Peri-anesthesia Nursing:

As peri-anesthesia nurses, we want to avoid harm to patients who choose to use alternative therapies. We need to be cognizant of the patients who take them, including the complications.