



Standardizing Research Protocol Practice on a Procedural Recovery Unit Through Effective Communication and Staff Education

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Background

One of the newest frontiers in cancer research and treatment is the injection of various substances into cancerous tumors. Multiple protocol procedures began occurring daily on our post-procedural unit, with each having different needs in recovery.

Some requirements included specific times for vital signs, collection of bloodwork, performing an EKG series, observation timeframe for adverse reactions, admission/discharge/transfer, and patient education. In addition to the regular recovery load, nurses had new and different types of patients on a variety of protocols to care for.

A need was identified for additional education and improved communication between the recovery nursing staff and research teams to facilitate patient safety and high-quality patient care while ensuring all protocol parameters were met.

Objective

The objective of this project was to consolidate the research data and improve communication between the research team and recovery nurses. The goal was to increase nursing knowledge and comfort level in caring for patients on research protocols.

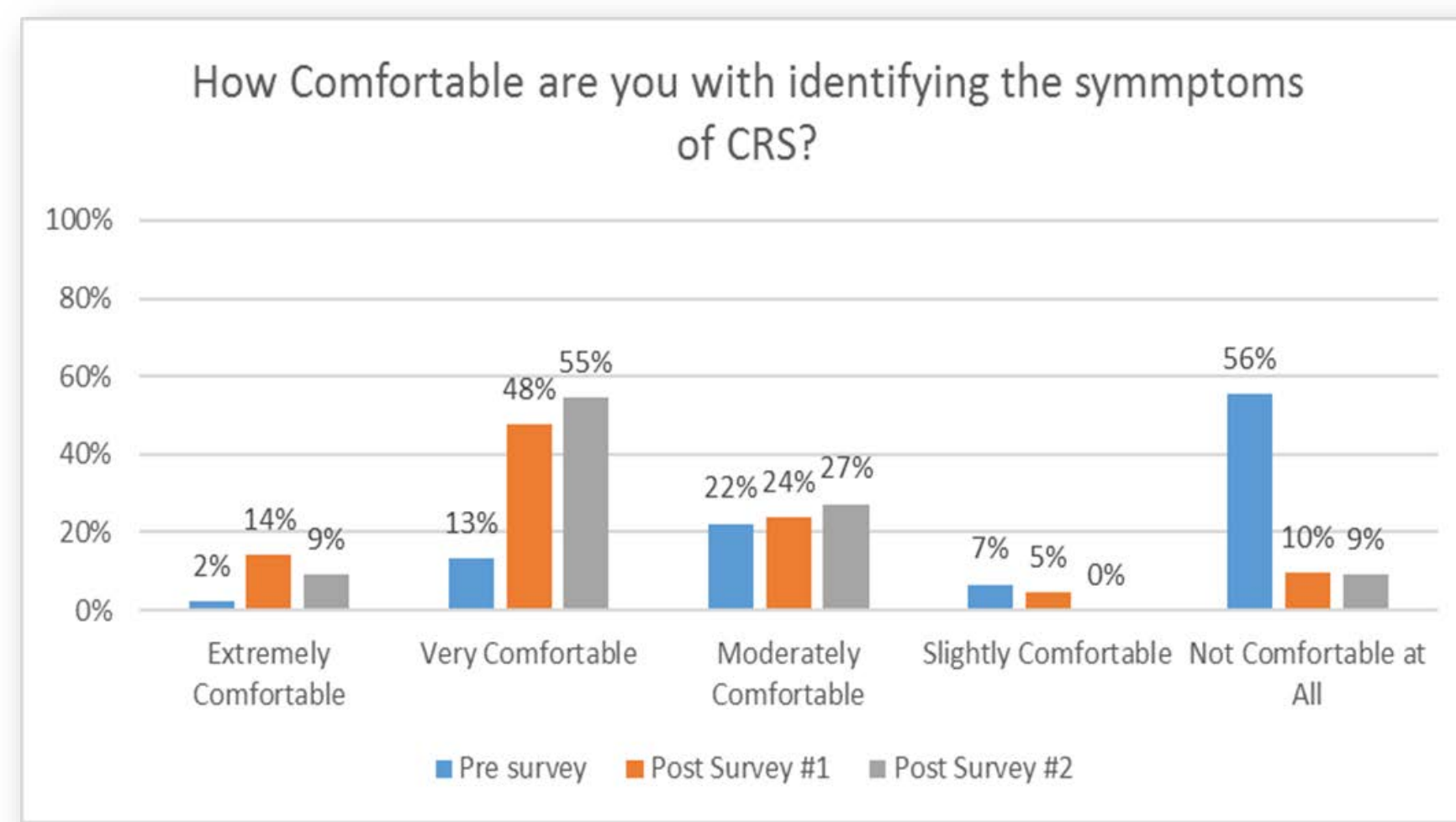
Implementation

The research teams created a series of educational sessions for each protocol to clarify points and provide staff an opportunity to ask questions. Laminated tip sheets were created and placed on the unit for reference. Also, monthly meetings with research coordinators and recovery nurses were scheduled to call attention to and resolve issues.

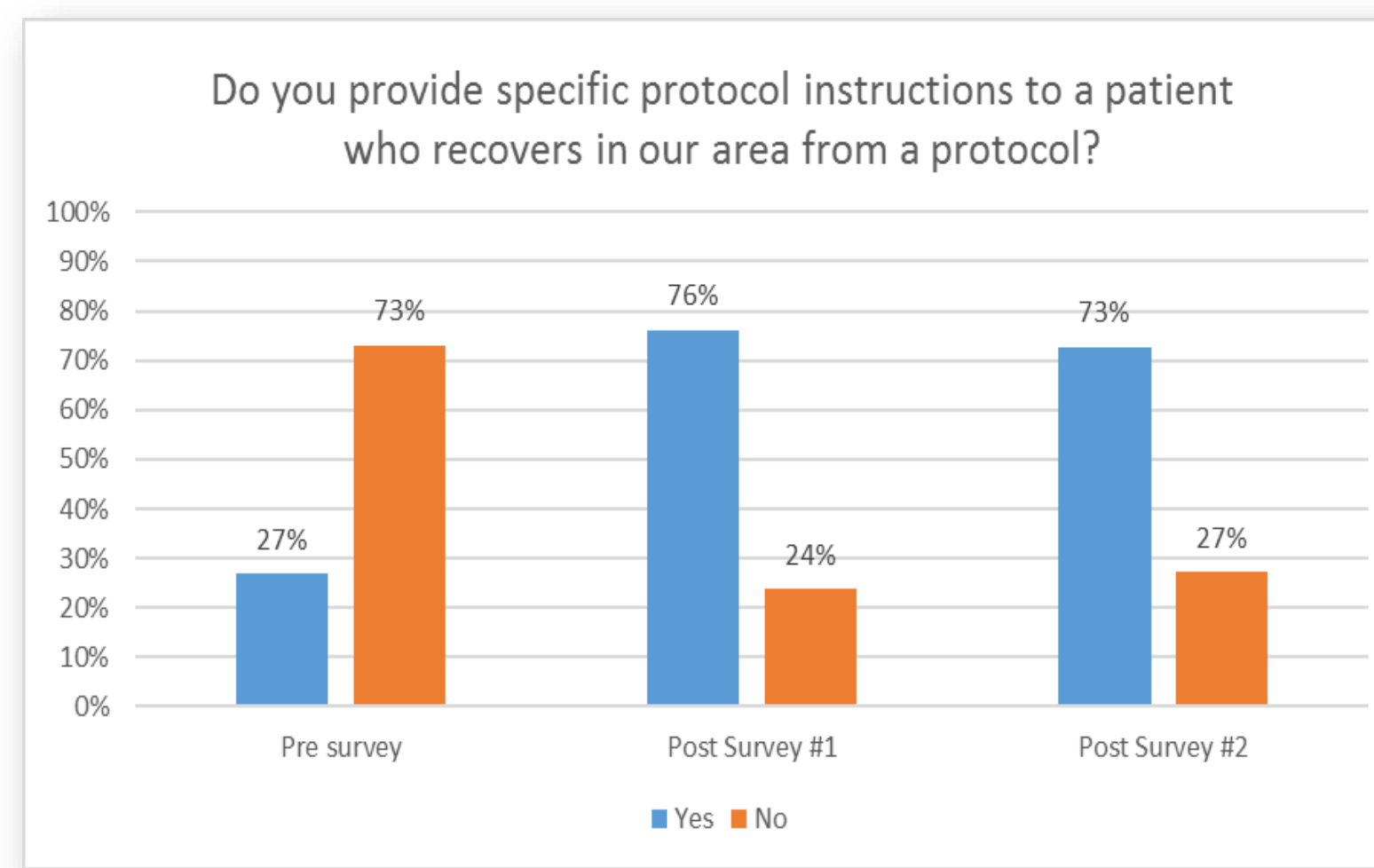
Research coordinators provided weekly reports and daily emails of changes were transcribed onto a daily reference sheet with all pertinent information for each patient's care. Staff were educated on Cytokine Release Syndrome and its protocols. Nurses were surveyed pre and post education, and again after six months of patient care for this population.

Survey Questions

- Do you know what the acronym CRS means?
- How comfortable are you with identifying the signs and symptoms of CRS?
- Do you know where the CRS Algorithm is located?
- Do you provide specific protocol discharge instructions to a patient who recovers in our area?
- How comfortable are you with patients who are on protocols and recovery in P3/G3?
- What would you like to see improve on the unit regarding protocol patients?

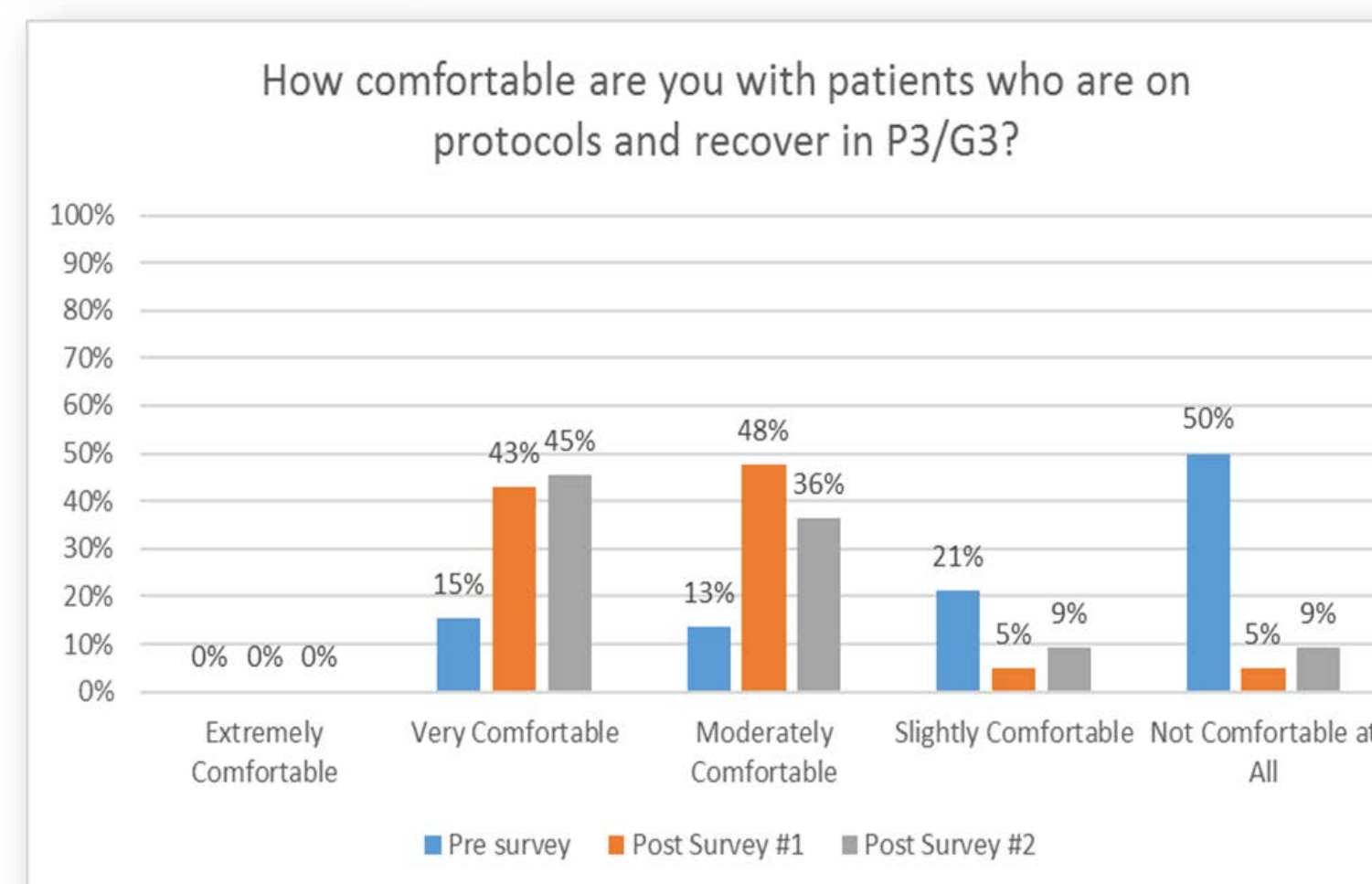


Survey Question 2



Survey Question 4

Survey Question 5



Nurses rated the importance of improvement in:

- ❖ Communication
- ❖ Nurse education
- ❖ Patient education
- ❖ Organization of protocol information
- ❖ MD response
- ❖ Orders
- ❖ Workflow

There was also an area to suggest improvements.

Sample Protocol Tip Sheet

Contact Info:
 Primary Investigator: Dr. Study
 Office: 123-456-7890
 Coordinator: Ann Coordinates
 Office: 987-654-3210

Injection start time: _____
Injection end time: _____
Recovery Time: _____

Vital Signs (B/P, pulse, temp, RR, and O2sat):
 Every 15 min

LABS:
 CBC, Chemistries and PK levels to be collected at pre-dose, 60 minutes post, and 12 hr post

EKG:
 Pre-Injection and 2 hours post injection

Side Effects:
 Chills, Fever, itching/rash/infection/swelling at the injection site; possible cytokine release syndrome

Discharge:
 Patient will be admitted on the floor prior to the injection, patient will go back to floor after recovery.

Statement of Successful Practice

The post education survey, both immediately after and six months later, showed an improvement in:

- nurse comfort level with caring for tumor injection patients
- increased understanding of Cytokine Release Syndrome
- where to find the CRS algorithm
- increased use of protocol-specific discharge instructions

Proactive education and standardization of research protocol information also increased nursing comfort in caring for tumor injection patients in post-procedural recovery.

Implications for Perianesthesia Nursing

- ❑ Constant updates, education, and management of tip sheets were needed to maintain correct information.
- ❑ The organization of the daily reference sheet received a very positive response from nurses.
- ❑ With each new protocol recovery nurses needed to encourage each research protocol team to provide education as well as create new discharge instructions, protocol fact sheets, and nurse education.
- ❑ An assigned group of staff to manage protocols was very helpful.

Acknowledgements

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