

INNOVATIVE PATIENT EDUCATION FOR PERIPHERAL NERVE BLOCKS: EMBRACING THE IPAD

Team Leaders: Elizabeth Budig BSN CPAN, Tracy Benzel RN CPAN
Providence Sacred Heart Medical Center, Spokane, Washington
Team Members: David Burns MDA, Tom Wakeley Media Services,
Lauri Ledbeter PHC Educator MSN RN-BC CNE CAPA

Background Information: Time and safety are of the essence when preparing patients for surgery. In the effort to maximize system efficiency and ensure that interdisciplinary colleagues have important time with the patient, education is often abbreviated and less-than-ideal. Patients are often overwhelmed with the volume of verbal information presented within a narrow time frame. Inconsistent word choice and differing priorities contribute to patient confusion. Research validates that optimal patient experiences incorporate patient education both before and after procedures. Most adult learners rely on multiple learning styles to maximize retention. Creating a standardized education approach that combines video, audio, and written media into the educational delivery improves consistency and learner comprehension.

Objectives of Project: To create an innovative, effective, and consistent method of peripheral nerve block education that results in improved patient understanding and satisfaction, accompanied with time-saving measures for nursing staff.

Process of Implementation: A needs assessment was performed identifying a necessity for patient and staff education, followed by grant application to support funding of equipment and training. Upon approval, a script was developed by key stakeholders, followed by a meeting to develop video production. Two videos were developed and edited to the stage of publication. The videos were uploaded to the iPads[®], the hospital closed-circuit television program for on-demand use, and the hospital YouTube[®] site for patient education. These were implemented into use, along with staff education, in August of 2016.

Statement of Successful Practice: Fewer patient questions surfaced prior to the nerve block procedure, thus supporting efficiency and less patient anxiety. Patient education at the time of discharge is more efficient, as nursing staff reported increased patient understanding of care as it pertains to the nerve block site (and pump, when indicated). Ongoing follow-up patient phone calls after discharge validate patient satisfaction and fewer questions.

Fewer phone calls were received from the post-operative units seeking further educational assistance with peripheral nerve block catheters.

Implications for Advancing the Practice of Perianesthesia Nursing: Future endeavors include expanding accessibility to iPads and videos to other Providence Health Care Ministries and considering development of other patient education videos.