A Collaborative Approach to Implementing Blue Light Cystoscopy

Danielle Clark BSN RN CNOR, Amy Dooley MS RN CPAN CAPA

**INTRODUCTION / BACKGROUND**

- White light cystoscopy and urine cytology are standard procedures to diagnose non-muscle invasive bladder cancer (NMIBC).
- Blue Light Cystoscopy (BLC) with Hexaminolevulinate (Cysview) has shown to improve tumor detection of non-muscle invasive bladder cancer.1
- Urology Team received approval to bring BLC to Lahey Hospital and Medical Center.

**OBJECTIVE**

The successful implementation of Blue Light Cystoscopy through collaboration, education and preparation of all stakeholders.

**STAKEHOLDERS**

- Urologists
- Ambulatory Surgery Nurses
- Operating Room Nurses
- Pharmacists
- Central Supply Personnel
-Schedulers

**IMPLEMENTATION**

- Identification & inclusion of Stakeholders
- Weekly meetings
- Equipment and supplies available
- OR equipment obtained
- Pharmacy: Cysview distribution
- Schedulers: Proper booking order
- Education: Handouts, Discussion,
  Presentation, Hands on demonstrations

**SUCCESSFUL PRACTICE**

- After four months of planning and preparation, the first BLC was performed successfully.
- 180 cases have been performed as of 02/2021.
- Success is attributed to the collaborative approach to training and support from all stakeholders.

**IMPLICATIONS**

- The identification and inclusion of all stakeholders at the beginning of this project was key.
- Communication throughout the process ensured all issues and perspectives were identified and addressed.
- Through education and support, success of the new BLC with Cysview was implemented seamlessly.

**REFERENCE**