

## **Ketamine Infusion Treatment (KIT): Emerging Role of PACU RNs in the Care of Veterans with Treatment-Refractory Depression (TRD) and Severe Suicidal Ideation (SI)**

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**Background:** Depression remains one of leading mental health conditions in the military. TRD is associated with reduced quality of life, social and occupational impairment, and higher likelihood of prior suicide attempts; veterans are particularly vulnerable to multiple psychiatric disorders, making them more susceptible to TRD amplifying clinical and economic burdens and treatment represents significant challenge for physicians.

**Objectives of Project:** To involve and educate PACU RNs in the implementation of non-traditional treatment procedure (ketamine infusion) in the PACU setting.

**Process of Implementation:** Since 2019 DVAHCS has been involved in preliminary use of ketamine infusion treatment (KIT) for TRD following established National Guidelines. Metrics gathered were utilized as criterion in the inception of local guidelines and development of Medical Center Policy (MCP).

The PACU RN champion involved during preliminary process helped identified necessary process changes and collaborated with interdisciplinary team members to develop MCP guidelines.

- a. A designated PACU bay area was selected where treatment can be done.
- b. Collaborated with IT team: update electronic health record documentation.
- c. Templated orders were created to minimize medication errors and facilitate its timely availability.
- d. Established time out verification process with attending psychiatrist prior to treatment & debriefing at completion seeking process improvement.

The PACU-RN champion collaboratively worked with Mental Health and TRD specialists, Educators and Managers developing a multi-spectral learning plan ensuring patient safety and PACU RNs competency for this new practice.

**Statement of Successful Practice:** Since implementation July 2023, ketamine infusion treatment was referred to 12 veteran patients. 5 of them are inter-facility consults, only two was able to qualify. The treatment was initiated with TRD specialist monitoring patient's response during infusion. Dose administered is adjusted accordingly during treatment. These veterans' PHQ-9 score was 25 and now scored 4. There was no significant adverse event noted during the whole treatment process. 100% nurses demonstrated an all-embracing attitude, shared their insight as noted in the survey.

**Implications for Advancing the Practice of Peri Anesthesia Nursing:** The PACU nurses unswerving involvement, participation in planning, inception, execution and continuous assessment lead to a successful implementation of this initiative.

They will play a critical and decisive role in increasing utilization while addressing prudent dynamism by welcoming innovative treatment therapies.