

Up and At 'Em: Decreasing Incidents of Delayed Ambulation or Requiring Knee Immobilizers for Ambulation After TKA and UNI

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Background Information:

- Inconsistency in the amount of local anesthetic used in adductor canal blocks (ACB) by anesthesiologist in Total and Uni Knee replacement patients was noted with chart review.
- Surgeons inability to use preferred amount of local anesthetic at the procedure site intraoperatively due to the large amount of local anesthetic used for ACBs
- Increased length of stay in patient population with knee buckling during initial ambulation attempt.
- An increase in patients requiring knee immobilizers for ambulation immediately after surgery was noted.

Objectives of Project: Standardize the amount of local anesthetic for ACBs to decrease incidents of delayed ambulation or patients requiring Knee Immobilizers for initial ambulation after Total/Uni knee replacement in September 2023.

Process of Implementation:

- Discussions with Surgeons and Anesthesiologists regarding standardization of local anesthetic amount for ACBs in TKA/UNI patients.
- Standardized amount was decided and the Anesthesiologist were educated.
- PreOp RNs were educated regarding the standardization for ACBs
- Chart Audits were conducted to track the effectiveness of the standardization

Statement of Successful Practice:

- Chart audits Findings:
 1. Confirmation of standardization of decreased local anesthetic injected for ACBs in the TKA/UNI patient population.
 2. No knee immobilizers were needed for initial ambulation after TKA/UNI in this patient population in September or October 2023.
 3. No TKA/UNI patients noted with knee buckling or delayed post-operative ambulation due to operative leg weakness required greater than or equal to a 4-hour post-operative stay in September or October 2023.
 4. Data after Sept 2023 showed the majority of patients requiring knee immobilizers after receiving the standardized ACB were less than 65" tall. A decreased amount of local for this patient population has now been implemented.

Implications for Advancing the Practice of Perianesthesia Nursing:

- To increase patient safety in ambulation initially and after discharge for same day Total /Uni knee replacement patients.
- To decrease with likelihood of LAST in Total/Uni knee replacement patients
- To decreasing the PACU length of stay for Total/Uni knee replacement patients
- Decrease case cost by decreasing likelihood of patient requiring knee immobilizer for ambulation