

POST OPERATIVE URINARY RETENTION: PHASE 1

Primary Investigator: Cidalia J. Vital, RN, MS, CNL, CPAN

Baystate Medical Center, Springfield, Massachusetts

Co-Investigator: Ann S. Ward, RN, BSN, MBA, CAPA

Post Operative Urinary Retention (POUR) is a common problem encountered in ambulatory surgery centers across the U.S. Its frequency ranges from as low as 5% to as high as 70% (Baldini, 2009). Chestnut Ambulatory Surgery Center at Baystate Medical Center has identified POUR as a frequent postoperative complication which causes increased length of stay, nurse and patient dissatisfaction and inefficiencies with operating room throughput. Though nursing staff felt a large amount of patients developed POUR it was not evident exactly the percentage of patients.

POUR was first identified at a unit based clinical practice meeting. The nursing staff felt it was something that needed to be studied closely. The unit CNS with the help of the unit perianesthesia nurses wrote the proposal and submitted it to the Institutional Review Board. With approval, a two stage study was initiated. Stage one of the research was completed at beginning of October 2012.

Phase one was to identify the incidence of post operative urinary retention. In the literature, POUR is defined as a bladder volume greater than 500 ml on entrance into the recovery area. The study population included patients who underwent surgery in our ambulatory surgery center from 2007-2010. Patients that were excluded were those who had intra-operative catheterization and patients under the age of 18. Eye, dental, and teeth extractions were also excluded as well as patients receiving dialysis treatments.

A retrospective chart review was completed. Reviewers looked at 578 charts and the POUR rate was 2.9% (95% confidence interval of 1.6%-4.3%). This rate was lower than predicted.

The importance of this study was recognition of the problem by clinical nurses. With the help of staff, Chestnut completed its first research study. As a Magnet institution, evidence based practice and research is an integral part of perianesthesia nursing. As we continue our journey into Phase II of the study, staff is enthusiastic and motivated on the research process. Staff hopes to continue to dissect POUR and its risk factors with Phase II.