

## **EXPLORING CV-PACU CLINICAL GUIDELINES UTILIZING INDEPENDENT PERIANESTHESIA NURSING INTERVENTIONS**

Primary Investigators: Paul Michael Tan MAN PhD, Jazzle Anne Magdaug RN,  
Marie Camille Agustin RN  
St. Luke's Medical Center – Global City, Taguig City, Philippines  
Co-Investigator: Carlo Miguel Villafaña RN

**Introduction:** Nurses play an important role as forerunners and advocate for total patient care. This study presents how independent nursing interventions helped in achieving fast and efficient mechanical ventilator weaning that delivers safe and quality outcomes for open heart surgery patients in Cardiovascular Post Anesthesia Care Unit (CV-PACU).

**Identification of the problem:** Baseline data from January - July 2013 showed that only 23 out of 47 patients (49%) were extubated less than 5-hour target. The absence of a structured CV-PACU Clinical Guidelines has somehow contributed to longer intubation time and prolonged stay in CVPACU.

**EP Question/Purpose:** The overall aim of this study was to create standardized CV-PACU Clinical Guidelines for perianesthesia nurses in handling open heart surgery patients. Specifically, this study was intended to hasten extubation time and shorten patient-stay in CV-PACU.

**Methods/Evidence:** Retrospective document analysis was initially utilized to describe and explore both qualitative and quantitative data. Purposive sampling was used in determining samples (f=252) for the study. A total of seven months look-back period was used as the baseline review and prospective document analysis was utilized after implementation of the intervention.

**Significance of Findings/Outcomes:** After the implementation, the study showed that a set of nursing interventions (Suctioning, Patient Stimulation, Oral Care and Turning) can be translated into a Bundle of Care for patients who underwent open heart surgery. By the end of 2013, 75% of patients were extubated in < 5hours (x= 4hr:44min). Also, the outcome showed that the mean extubation time was consistently hastening to 4hr:19min (2014), 3hr:53min (2015), and 3hr:25min (2016). Furthermore, the time of patient-stay in CV-PACU went down from x= >10 hours (2013) to x= < 6 hours (2016). For the first half of 2017, this continuously shortened to x= 3hr: 33min for extubation time and x=4hr: 54min for total patient-stay.

**Implications for perianesthesia nurses and future research:** With the creation of standardized CV-PACU Clinical Guidelines for perianesthesia nurses, this can be cascaded into several medical institutions that cater open heart surgery in the Philippines.