

INTRODUCTION

Post-Operative neuromuscular and neurovascular (NM/NV) assessments are crucial for early detection of complications in total joint replacement (TJR) patients. Inconsistent documentation and varying assessment techniques can lead to delayed recognition of post-operative complications, potentially compromising patient outcomes.

IDENTIFICATION OF THE PROBLEM

Chart audits revealed that only 72% and 61% of required NM/NV assessments were properly documented, with significant variations in assessment techniques among nurses. Approximately 40% of the documented assessments lacked one or more critical components as defined by organizational standards.

PURPOSE OF THE STUDY

This quality improvement project aimed to:

- Standardize NM/NV assessment documentation practices
- Increase documentation compliance to greater than 90%
- Improve the completeness and accuracy of assessments in post-operative TJR patients

ACKNOWLEDGEMENTS

PACU leadership and staff at Adventist HealthCare Shady Grove Medical Center; Director of Surgical Services, Heather Burton, MSN, RN, NEA-BC, CNOR; SGMC Joint Center of Excellence Coordinator, Kaitlynn Blumenthal, BSN, RN, CMSRN; Perianesthesia Education Specialist, Seema Hussain, MSN, RN, CPAN, CAPA

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Enhancing Post-Operative Neuromuscular And Neurovascular Assessment Documentation Compliance In Total Joint Replacement Patients: A Quality Improvement Initiative

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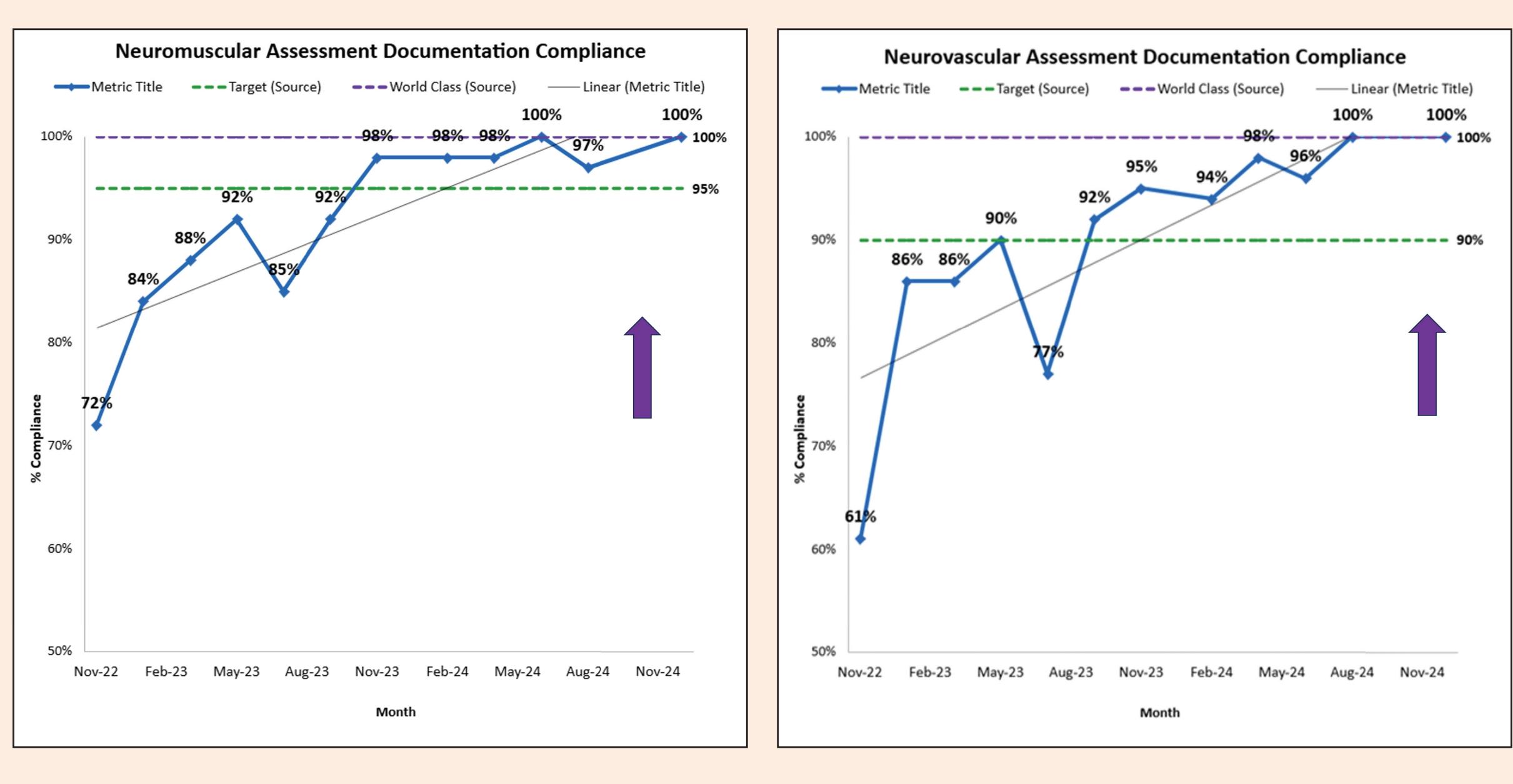
METHODS

A pre/post-intervention design was implemented over 24 months in a 25-bay post-anesthesia care unit. Interventions included:

- Development of a standardized electronic health record documentation template
- Implementation of an evidence-based NM/NV assessment protocol
- Creation of bedside reference tools
- Mandatory staff education sessions
- Peer review process
- Real-time audit and feedback system
- Data collection included chart audits and direct observation of assessment techniques
- Assessment compliance and completeness were measured monthly and reviewed with staff during monthly staff meetings

OUTCOMES

Neuromuscular



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Neurovascular

RESULTS

Post-intervention results demonstrated:

- Documentation compliance increased from 72% to 94% and 61% to 98% for NM/NV respectively
- Zero missed complications due to inadequate assessment during the study period

DISCUSSION

The multi-faceted approach addressed key barriers to consistent NM/NV assessment documentation. The standardized template and protocol significantly improved assessment quality and documentation compliance. Staff education and regular feedback were crucial for sustaining improvements.

CONCLUSION

Implementation of standardized documentation processes and evidence-based protocols, combined with comprehensive staff education, effectively improved the quality and consistency of post-operative NM/NV assessments in TJR patients.

IMPLICATIONS FOR PERIANESTHESIA NURSES AND FUTURE RESEARCH

This quality improvement initiative provides a framework for:

- Implementing standardized assessment protocols in perianesthesia setting
- Improving documentation compliance through systematic
- approaches
- Enhancing early detection of post-operative complications Supporting evidence-based practice in post-operative care

- complication rates
- Assess long-term sustainability of improvements Assess impact on patient outcomes and length of stay Explore application to other surgical populations Develop automated compliance monitoring systems Investigate correlation between assessment quality and

Next Steps: