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Evidence-Based practice nursing interventions for improved functional and cognitive outcomes in the Traumatic Brain Injury Patient

Judith Kutzleb

Fairleigh Dickinson University, USA

Problem: Traumatic brain injury (TBI) results in a combination of physical, cognitive, and behavioral impairments with an estimated 1.5 million Americans sustaining a TBI every year. The overall purpose of this program was to implement evidence-based practice protocols for clinical management of traumatic brain injury patients. The routine integration of the EBP protocols of: pulse oximetry and blood pressure monitoring every two hours; toileting and limited distance ambulation (10 to 25 feet) every two hours during the patients wakeful state; baseline Orientation-Log assessment (O-Log) on admission then on a daily basis; physical therapy and speech/cognitive therapy evaluations within 24 to 48 hours of admission were implemented to improve the functional and cognitive outcomes; and reduce bedside patient sitters in the acute care setting.

Data Source: This was an exploratory pilot program that implemented RBP protocols for the clinical management of TBI patients. An analysis of trends (pre-EBP of 58 TBI patients Vs. post-EBP of 50 TBI patients) was utilized to evaluate whether change in practice made a significant difference in improving patient's outcome.

Conclusion: The EBP protocols decreased sitter sessions by 80% and enabled TBI patients to achieve states of functional and cognitive well-being with a structured approach to clinical management. The finding for sitter session usage

showed a reduction from 30 sessions 3 months before program implementation to 6 sessions during program implementation, with a continued sitter session reduction of 0 sessions for 6 months post program implementation. The results of this program established a structured and sustainable approach to the clinical management of TBI patients. Through the strategic cycle of patient assessment, ambulation, toileting, and hemodynamic status evaluation, patients became less apt to develop confused agitated states, which supported a safer patient environment and reduced the need for sitter sessions.

Implications for Practice: Results indicate that the EBP protocol created a structured approach to clinical patient management for the nursing staff. The continuous repetition of patient interventions supported by the protocols in concert with staff education on TBI and its consequences, created skill development in the nursing staff for assessing and managing altered states in this patient population.

Speaker Biography

Judith Kutzleb, is working in the Fairleigh Dickinson University and in Holy Name Medical center from October 2009. Previously she has worked in Hackensack University Medical Center from May 2006 to March 2010. She has hold Doctorate of Nursing Practice and currently she is doing research in Traumatic Brain Injury.

e: kutzlebd@aol.com

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