AACN CSI Academy Team Tackles Alcohol/Substance Withdrawal

A nurse-driven protocol decreased average ventilator days 25 percent, saving an anticipated $1.8 million annually.

Alcohol-related complications in the ICU are associated with increased length of stay and nearly three times the number of healthcare-associated infections. Symptoms ranging from mild anxiety to hallucinations and severe agitation continue to challenge clinicians.

A team of bedside nurses from the medical ICU at Maimonides Medical Center, Brooklyn, New York, tackled the issue through AACN Clinical Scene Investigator (CSI) Academy and achieved significantly improved clinical outcomes while saving an anticipated $1.8 million per year.

Their strategy — to develop and implement a nurse-driven, evidence-based protocol — increased early recognition and management of patients in withdrawal, both considered keys to good outcomes.

“These patients are resource-intense and clinically challenging for the nurses,” says CSI coach Camille Scarciotta, vice president of nursing at Maimonides. “There were no clear guidelines or MD order sets, and our intensivists had varying approaches to clinically managing them.”

The team’s tactics included surveys to measure staff perception of caring for patients in withdrawal and collaborative development of treatment algorithms and order sets. Other tactics were consistent use of the Richmond Agitation Sedation Scale (RASS) and unit champions to reinforce protocol use.

The hard work paid off with 100 percent adoption of RASS. Average length of stay for patients in withdrawal decreased 19 percent in the MICU and 27 percent in the hospital overall. Average ventilator days decreased 25 percent.

Charge nurses Laurie Wilson and Maria Christina Ycaza-Gutierrez, both CSI team members, say, “We’ve seen how early resolution of withdrawal symptoms leads to fewer complications and shorter length of stay. Families seem more at ease when withdrawal symptoms are properly managed, and having a protocol in place makes us feel more confident caring for these difficult and challenging patients.”

As a result of their experience, Wilson and Ycaza-Gutierrez “realize the value of evidence-based projects in improving patient care as well as increasing nursing job satisfaction.”

Visit the AACN CSI Academy Innovation Database at www.aacn.org/csiprojects to learn about the results of other CSI team projects.

March Webinar Explores Alcohol and Opiate Withdrawal in Critical Care

The prevalence of alcohol and opiate use in society continues to rise, yet few nurses receive formal education on identification and treatment of alcohol withdrawal syndrome (AWS) or opiate withdrawal.

Join AACN March 12 for a free webinar: “Alcohol and Opiate Withdrawal: Is Your Patient at Risk?” Presenter Rosemary Lee — clinical nurse specialist for critical care and progressive care at Homestead Hospital in Florida — will discuss the importance of early recognition and risk mitigation of withdrawal in critically ill patients, and provide relevant evidence-based best practices and case studies.

Visit www.aacn.org/webinars for more information and to register.