f. Advancing Your Education to the Doctoral Level: Doctor of Nursing Practice (DNP)

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Advancing Your Education to the Doctoral Level: Doctor of Nursing Practice (DNP)

Marilyn Cejka Steinberg, DNP, CNS, RN-BC, NNP-BC, C-EFM
Choosing the DNP

- Practice-based doctorate
- Translation of evidence to practice
- Tailored to advanced practice nurse
  - Clinical nurse specialist
  - Nurse practitioner
  - Certified nurse-midwife
  - Nurse anesthetist
Choosing the school

Manageable with work schedule
Accredited program
Curriculum
Faculty member with similar research interest
Cost
Start dates

Became process of elimination
In this program, you will be prepared to:

• Improve health outcomes through leadership in the nursing field.
• Guide your advanced nursing practice by analyzing current research in the nursing field.
• Develop a foundation for lifelong learning in the nursing field by taking a leadership role in professional organizations.
• Advocate for the advancement of nursing and healthcare policy.

https://info.waldenu.edu
Coursework

• Healthcare policy and advocacy
• Quality improvement
• Evidence-based practice
• Information systems/technology
• Advanced nursing practice
• Organizational and systems leadership

https://info.waldenu.edu
Challenging experience

Instructors in online program are not necessarily permanent faculty

- Doctoral project manuscript approval process
- Awareness of resources for students
Rewarding experience

Opportunity to interact with advanced practice nurses from many backgrounds and geographic areas
• Obstetric hemorrhage is one of the most common causes of maternal morbidity and mortality.

• Measurement of quantitative blood loss (QBL) at delivery permits early recognition of hemorrhage for prompt treatment.
Problem

QBL

Not practiced consistently

EBL (Estimated Blood Loss)

Most common method of measurement

Underestimation of blood loss

Delay in identification and treatment of hemorrhage
# Project Design/Method

| Prepare weekly scorecards | • Blinded individual data  
|                          | • Aggregate unit data  
| Display                  | • Percent of patients with blood loss documented  
|                          | • Percent of patients with QBL documented  
| Present scorecards as feedback | • At weekly meetings  
|                          | • Post on unit  

Findings

Percent of Patients with QBL Documented at Delivery

- Week 1: 22.7%
- Week 2: 50.0%
- Week 3: 57.1%
- Week 4: 48.9%
- Week 5: 75.9%
- Week 6: 73.2%
- Week 7: 77.8%
- Week 8: 82.1%
- Week 9: 77.8%
- Week 10: 63.0%
- Week 11: 80.0%
Comparison of QBL and EBL Volumes for Total Deliveries
Findings

Balancing measures:

• Number of patients who received blood products (7)
• Number of units of blood products administered (1 – 7 units)

Transfusions during weeks 1, 2, 4, 8, 10, 11

No apparent association with increasing QBL documentation
References


