Effects of Sedation Vacations and Sedation Level Quality Improvement Project

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Background
• Respiratory Director consulted with Vyair to collect data to monitor sedation usage and spontaneous breathing trials (SBT) in the intensive care units (ICUs)
• Findings were presented to the ICU managers/educators
• Findings indicated that there was an increased use of sedation with extended ventilator days
• Sedation vacation/interruption attempts were minimal when ventilator days were increased
• Do sedation vacations and lower levels of sedation decrease the number of days a patient spends on a ventilator/improve patient outcome

Purpose
“Deep sedation is associated with prolonged mechanical ventilation (MV), longer ICU stay, and higher mortality” (Mehta, et.al., 2016 p 2)

Methods
• Data collection was performed by Respiratory/Vyair without bedside nursing knowledge to achieve baseline data
• Passive education was provided by reviewing policy and protocols in staff meetings without discussion of data collection to staff
• Formal education was developed by ICU educators in collaboration with pharmacy and assigned to ICU staff on Healthstream, with 100% compliance for the goal of completion

Impact
• Requires collaboration with respiratory therapist on timing for SBT with sedation vacations
• Re-education of staff on performing sedation vacations daily may be required
• Education is ongoing and needs to be applied to all staff working in the ICU

Outcome
• Staff engagement improved in 2018
• Ventilator policy and protocols were changed to reflect the current standard for daily sedation vacation to occur unless specified by physician order to continue uninterrupted sedation
• With passive education, staff were reminded that patients needed a daily sedation vacation to reduce ventilator days

Discussion
• Problems and solutions were noted by nurses working on the frontline
• Staff noted with that an increased number of ventilator patients led to a slight increase in ventilator LOS
• Staff questioned if there was a possible correlation between number of ventilated patients and ventilator LOS

Results
• There was a decrease in sedation usage of 35% with only passive education
• Ventilator length of stay (LOS) goal is 3.5 or less with an ICU LOS 5 or less
• There was an additional decrease in sedation usage and a decrease in ventilator days

References
Available upon request