

Abstract Comprehensive Care Models in Cirrhotic Ascites: Combining a Paracentesis with an office visit to improve outcomes

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On my honor I pledge that I have neither given nor received any unauthorized assistance on this paper. 04/28/2021 Whitney E. Steinmetz

Abstract

Background and Purpose: The most common complication of cirrhosis is ascites, and its presence confers a poor prognosis. The evidence overwhelmingly supports comprehensive care models for management. The purpose of this quality improvement (QI) project was to determine whether combining a paracentesis procedure and albumin infusion, with a standard APRN office visit improved patient satisfaction, reduced cost, and reduced emergency department and hospital admissions.

Methods: The design was a pre/posttest between comparison and comprehensive groups. Financial data was collected for a descriptive comparison of cost. The setting was in an Interventional Radiology (IR) department. The intervention included an APRN office or telephone visit to patients undergoing paracentesis procedure in IR. The participants completed the Press Ganey patient satisfaction questionnaire. This validated survey measured patient satisfaction.

Results: A total of 20 participants completed the project. There were no statistically significant differences in patient satisfaction (p value = .160) or in ED or hospital admissions (p value = .103). There was a 57% reduction in admissions among patients that received an office visit and a 56% reduction in the comparison group when patients began receiving albumin infusions with their paracentesis procedure. The unit cost was the same in both comparison and treatment group at the staff level of APRN, though the treatment group included an office visit which increased value but not unit cost.

Conclusion: The findings suggest that adding an APRN office visit to a paracentesis procedure reduced ED and hospital admissions and added value without additional cost. Patient satisfaction remained high when an office visit was added to usual care.

Implications: Adding APRN management to the procedural aspects of ascites has a positive impact on patient outcomes and further studies are needed to determine best time interval for nurse-managed follow up and effects on patient outcomes.

Keywords: *cirrhosis, ascites, paracentesis, comprehensive care model, APRN*