Reducing OR Delays Through Difficult IV Access Toolkit

Chelsea Salomon, CRNA
Johns Hopkins School of Nursing
NR.210.889 Project Evaluation

Project Advisor: Ivy Latoja Pacis DNP, MHA, RN, NE-BC, CPHQ, CCRN-CMC

Assignment Due Date: April 9, 2023

On my honor, I pledge that I have neither given nor received any unauthorized assistance on this paper. April 2, 2023
Abstract

This paper focuses on the effect of giving pre-operative nurses a toolkit aimed at reducing operative delays caused by patients with difficult intravenous access (DIVA) as these delays consume time and resources that could be better utilized. This pre and post quality improvement project took place at a tertiary care, academic teaching institution in New England, where pre-operative nurses were given a DIVA patient toolkit aimed at reducing operative delays caused by DIVA patients while monitoring nursing satisfaction. The toolkit was comprised of an identification tool as well as targeted use of ultrasound-guided techniques to obtain intravenous access. Operative delay counts and total time was measured pre-intervention and post-toolkit implementation through a review of electronic charting. Nursing satisfaction was monitored pre and post-using the short form of the Minnesota Satisfaction Survey, a twenty-question validated tool. The results show an increase in operative delay counts, 17 pre and 26 post, with no statistically significant change in the average delay time, 21.23 minutes pre-implementation and 23.73 minutes post-implementation, and a 7.4% decrease in nursing satisfaction, however, neither result was statistically significant.

Keywords: intravenous access, ultra-sound guided, operative delay, vascular access, nursing satisfaction