



Timing of Labor Epidural Informed Consent Process Promotes Patient Safety and Understanding: Recall of Risks, Benefits, and Alternatives

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DNP852B PROJECT DISSEMINATION

DNP Project Final Defense

March 2024

DNP Committee Members

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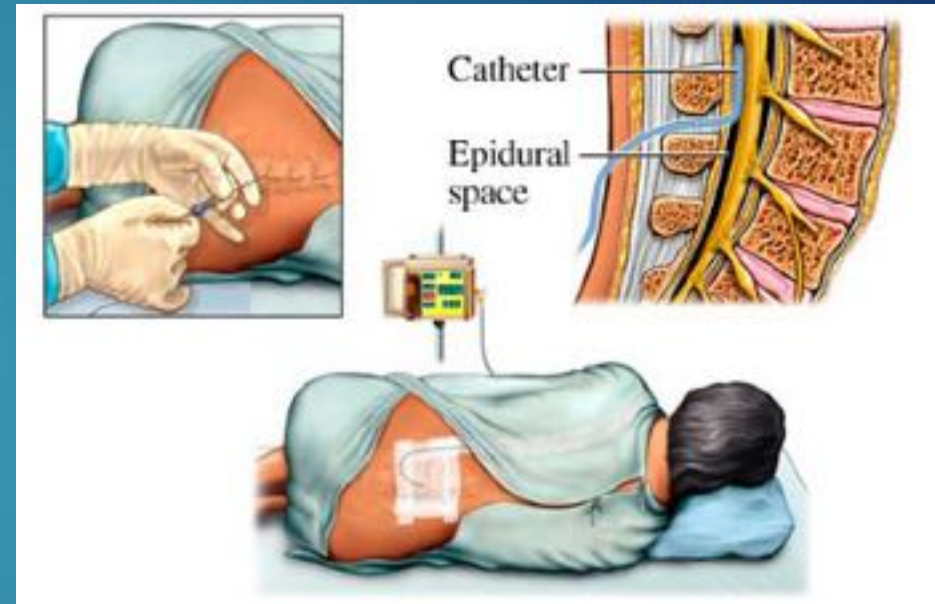
Independent Reviewer: Dr. Jeremy
Delmore, DNP, MSN, RN, BSHA

Presentation Outline

- ▶ Introduction and Background of the Project
 - Background and gap at the project site
 - Problem statement
- ▶ Purpose and PICOT question
- ▶ Theoretical Frameworks
- ▶ Change Model
- ▶ Overview of the Evidence
- ▶ Project Design
- ▶ Data
- ▶ Ethical Considerations
- ▶ Results
- ▶ Discussion of Findings
- ▶ Implications for Nursing Practice
- ▶ Plan for Dissemination
- ▶ Plan for Sustaining Change
- ▶ Recommendation for Future Projects
- ▶ DNP Essentials

Introduction and Background of the Project

- ▶ Consent process for labor epidural
- ▶ Pain affecting decision-making capacity and capability of the parturient
- ▶ EBP QI project



Background at Project Site

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- ▶ Project site: L&D Unit
- ▶ Deliveries per month
- ▶ Staff
- ▶ Background
- ▶ Informed Consent



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Gap at Project Site

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- ▶ Identified Gap on the labor and delivery unit



Problem Statement

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- ▶ Labor epidural = elective procedure
- ▶ Nature of the problem
- ▶ Impact of the problem on the parturient population (RISK)



Problem Statement Continued

- ▶ Risks of placing an epidural continued
- ▶ Consequence of risk
- ▶ EBP QI Project (practice change)



Purpose of the Project

- ▶ DNP quality improvement project based on EBP
- ▶ Old way: non-standardized, untimely informed consent process for labor epidural placement
- ▶ New Way: Timely, standardized, use of epidural video (decision-aid)
- ▶ Patient/ Family can view as many times as necessary to obtain full understanding



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PICOT Question

- ▶ Does initiating the informed consent process for parturient patients on admission to the L&D unit when pain scores are lower instead of later in the admission when pain scores are higher related to advanced stages of labor increase the information retained during the informed consent conversation?
- ▶ P- (Patient) Parturient population admitted to the L&D unit
- ▶ I- (Intervention) Initiating the informed consent process on admission to the L&D unit when pain scores are lower
- ▶ C- (Comparison) Instead of later in the admission when pain scores are higher related to advanced stages of labor
- ▶ O- (Outcome) Increase the information retained during the informed consent conversation as evidenced by higher scores on Informed Consent Information Questionnaire (ICIQ).
- ▶ T- (Time Frame) Over 7 weeks

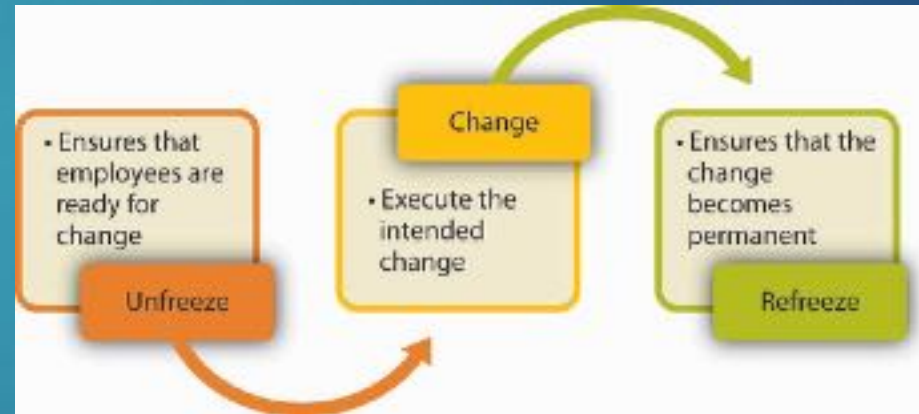
Theoretical Frameworks

Nursing Theory-Guided Practice



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Lewin's Theory of Planned Change



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Change Model- Lewin's Theory of Planned Change

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- ▶ Discuss the Change/ EBP model that will guide and direct proposed changes and achievement of project outcomes

Overview of Evidence

- ▶ Databases utilized for literature review
- ▶ A review of the literature
 - ▶ (Widmer et al., 2020)
 - ▶ (Chin et al., 2020)
 - ▶ (Rafla-Yuan et al., 2021)

Overview of Evidence Cont.

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- ▶ A review of the literature continued
 - ▶ (Litvack et al., 2022)
 - ▶ (Schmiedhofer et al., 2022)
 - ▶ (Shishido et al., 2020)
 - ▶ (Alakeely et al., 2018)

Project Design

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- Project Design: Quantitative survey design
- Evidence-based quality improvement intervention
- Purpose
- Shared Decision-Making Theory

Project Design Continued

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- ▶ Methodology
- ▶ Post-informed consent questionnaire
- ▶ Informed Consent Information Questionnaire (ICIQ)

Instrumentation

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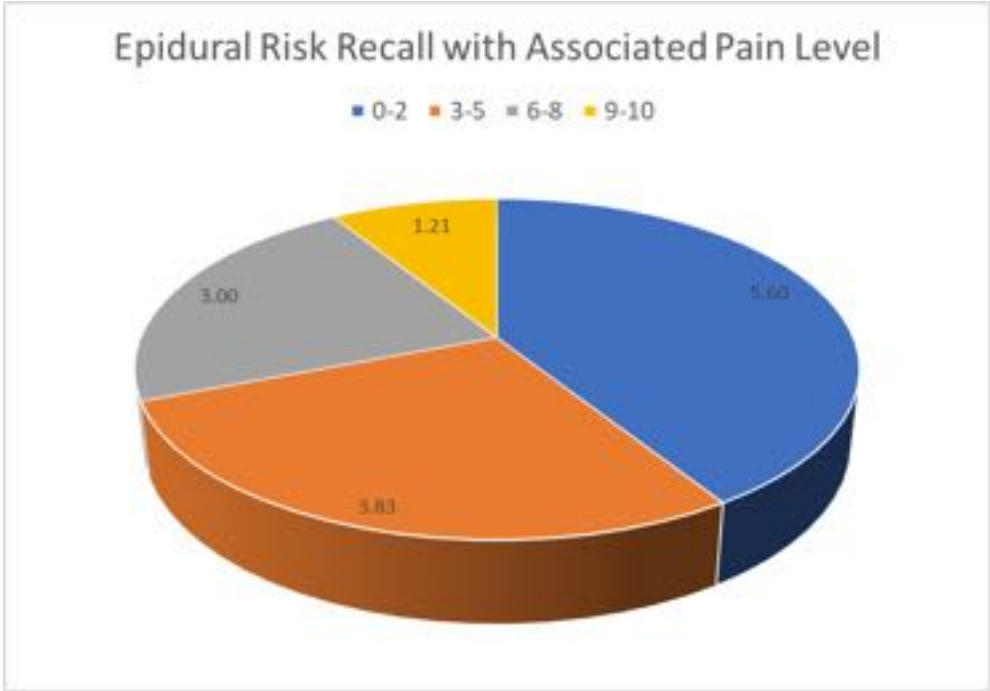
- ▶ Post-informed consent information questionnaire (ICIQ)

Data

Data Collection	Data Analysis	Data Management
Questionnaire during the post-anesthesia evaluation (PAE)	Compare data between parturients who underwent early informed consent process to those who underwent the process during advanced stages of labor	Non-identifiable data, secured questionnaires in a secured location

Ethical Considerations

VULNERABLE POPULATION



Pain Level	0-2	3-5	6-8	9-10
	9	1	2	3
	7	0	3	2
	8	9	7	3
	9	1	4	1
	9	6	2	0
	3	6	1	0
	8		1	0
	3		1	0
	4		0	0
	7		1	2
	8		0	2
	1		6	0
	0		6	1
	4		2	3
	4		5	
			4	
			3	
			3	
			4	
			5	
	0-2	3-5	6-8	9-10
	5.60	3.83	3.00	1.21

Results

Discussion of Findings

- ▶ What do the findings suggest?



Implications for Nursing Practice

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- ▶ What do my findings mean for Nursing Practice?
- ▶ The focus of the process improvement project
- ▶ Shared decision-making
- ▶ Safer practice

Plan for Dissemination

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- ▶ Presentation of outcomes
- ▶ Journal publication
- ▶ American Association of Nurse Anesthesiology (AANA)
- ▶ American College of Obstetricians and Gynecologists (ACOG)



Plan for Sustaining Change

- ▶ Sustaining change
- ▶ New provider orientation
- ▶ Continued communication



Recommendation for Future Projects/Research

- ▶ Recommendations based on findings and project experience
- ▶ Cost Savings
- ▶ View epidural video during early OB clinic visits
- ▶ Intervention period greater than seven weeks

Essential	How Did We Do?
DNP Essential I, II, III, V, VIII	How did we meet these DNP Essentials?

Summary

- ▶ Introduction of DNP Committee Members
- ▶ Proposal outline
- ▶ Introduction of the problem
- ▶ Background/Gap at project site
- ▶ Problem statement
- ▶ Purpose of the project
- ▶ PICO Question
- ▶ Theoretical Framework
- ▶ Change Model
- ▶ Overview of the Evidence
- ▶ Project Design
- ▶ Data
- ▶ Potential Barriers
- ▶ Ethical Considerations
- ▶ DNP Essentials

Questions/Discussion

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Any Questions?



Further Discussion?

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