

Sepsis Best Practice Alert

As part of a multidisciplinary effort to improve sepsis care at UVA, Best Practice Alerts (BPAs) have been built into Epic when all 4 criteria for Systemic Inflammatory Response Syndrome (SIRS) have been met by the patient. The BPA will notify nurses, PCA/PCTs, LIPs, pharmacists, dietitians, and therapists. The BPA feature has been turned on for Acute Care Units only beginning on November 13th and will fire upon opening a patient's chart or when criteria are met during documentation.

When you see this alert for one of your patients, call the MET Team at 4-2012 and indicate that you have received a "Sepsis BPA."

Prevention of Aspiration in Adult Inpatients

A new procedure for the Prevention of Aspiration in Adult Inpatients has been approved and posted. The CPG addresses prevention of aspiration in patients who are eating by mouth and those who are receiving tube feeding. Requirements and recommendations for formal evaluation of swallowing ability are included. Please review the complete CPG (insert link) and contact Dea Mahanes, RN, sdm4e@virginia.edu, if you have any questions.

Charles L. Brown Award Winners

The Pediatric Catheter-Associated Blood Stream Infection (CA-BSI) team recently received the Charles L. Brown Award for their work to reduce the rate of CA-BSI in the pediatric units.

The CA-BSI team implemented two best practice bundles, one for insertion of the catheter and one for the maintenance. By following evidence-based best practices, increasing awareness and auditing practices, the rates of CA-BSI decreased from 3.9 infections per 1,000 line days before intervention, to 1.9 infections per 1,000 line days after intervention.

The CA-BSI team consisted of staff from the PICU, Acute Care Pediatrics, KCRC, Department of Pediatrics, Department of Anesthesiology, Infection Prevention and Control and Quality and Performance Improvement. Debra Stergios, RN; Laura Lee, MD; Catherine Davis, RN; Tausha Grim, Assistant Nurse Manager, PICU; and Nancy Addison, RN plan to use the \$10,000 grant to further their work and education with catheter-associated infections.

Click [here](#) to read the full announcement on Link.

Adult Weight-Based Heparin Nomogram

Upcoming changes to the heparin nomogram and its management went live hospital-wide on Tuesday, November 13th, 2012. There will now be a 3-level heparin nomogram with FULL bolus (for arterial and venous thrombus), LOW bolus (for ACS +/- GP IIb/IIIa inhibitors and patients treated with concurrent thrombolytics except ischemic stroke), and NO bolus (high risk of bleeding). Therapeutic PTT range is subject to change based on annual changes to the formulation of the heparin reagent; for the 2012 - 2013 protocol, the PTT range will be changed from 64-101 seconds to 69-97 seconds. These nomograms will be available from the [Anticoagulation Website](#) and from the [Clinical Practice Guidelines and Protocols](#) link prior to implementation.

To assess the feasibility of a nurse-managed protocol to replace the current physician-managed nomogram, a pilot study was conducted earlier this year on selected acute care floors (3 Central, 3 West, 4 East and 6 West). The pilot demonstrated a statistically significant decrease in time-to-therapeutic PTT when comparing physician-managed to nurse-managed heparin anticoagulation (32 hours versus 19 hours, respectively), and reduced the lag time between PTT being recognized as not therapeutic and a change being made to the infusion. Additionally, nursing staff was more cognizant of when labs were being drawn and could easily identify and address phlebotomy delays. Based on these findings, Patient Care Committee (PCC) approved the proposed nurse-managed, adult weight-based heparin nomogram for hospital-wide implementation.

A Heparin Nomogram LIP CBL will be available prior to implementation to outline the changes in practice. Additionally, all nursing staff will complete a mandatory Heparin Nomogram CBL. Please contact Dr. Macik or Dr. Maitland with any questions.

Please click [here](#) to view Positive Comments from the October Patient Satisfaction surveys! To find an LIP name, hold down both Ctrl+F to search.