

Device Management Program (DMP)

An Interactive Pathway

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Purpose

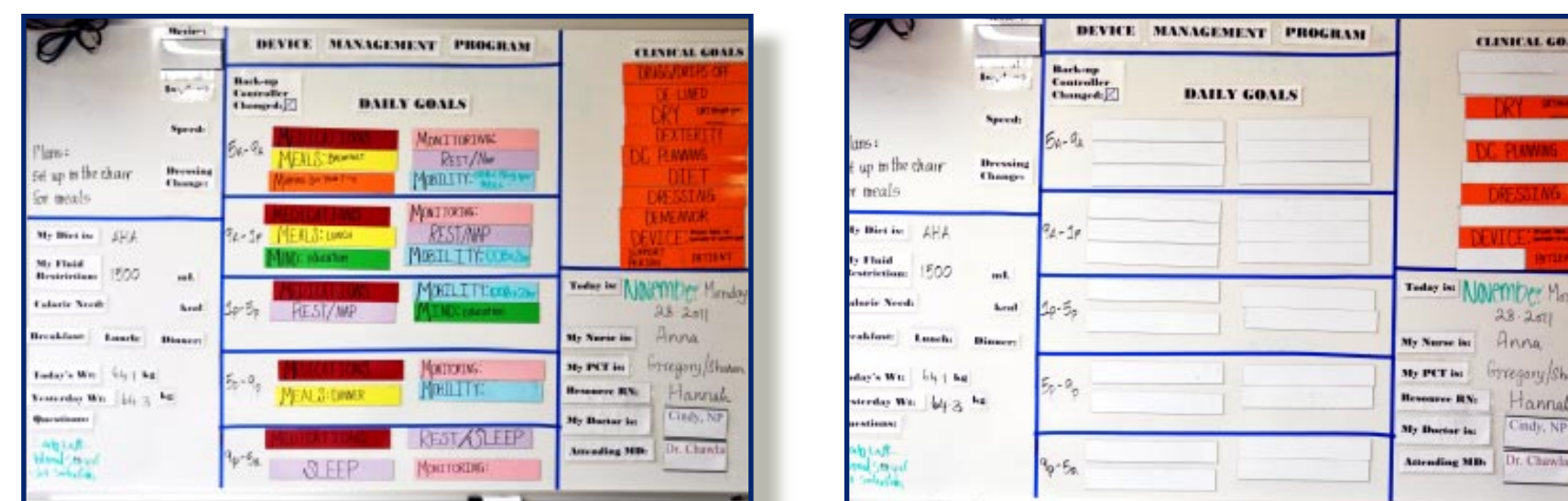
- To decrease length of stay and increase patient satisfaction by developing teaching and plan of care interventions for our patients with implanted Left Ventricular Assist Devices (LVAD)
- To increase accountability for nursing and other disciplines in plan of care and discharge planning process

Significance

- The impact of morbidity, length of stay and patient satisfaction were the triggers for the creation of an interactive patient education board
- The heart failure multidisciplinary team developed a standardized plan of care (POC) for LVAD patients
- This interactive plan leads to a safe and timely discharge of patients

Methods & Implementation

- Upon arrival to the unit, the patient is oriented to the purpose and modules of the board by the nurse
- Daily POC and clinical discharge goals are broken into discrete "modules" and each module is characterized by a clinical focus and represented by a color
- The Patient is expected to participate in meeting the POC as outlined in the modules on a daily basis and the clinical discharge goals before discharge
- The nurse is expected to ensure that the daily POC needs for their patient are met and the modules are turned to white before 9 pm
- The nurse and or the interdisciplinary team are expected to turn the clinical discharge goal module to white if completed during their shift
- The board appearing white is a positive visual reminder for patients, family, and the interdisciplinary team that the patient's daily POC and clinical discharge goals have been completed



Daily POC Goals of DMP-7 M's

- Mapping:** Review of previous day's performance and current day's goals
- Medications:** Medication administration and education
- Meals:** Specific time set for meals with charting of caloric and other nutritional intake
- Meditation (Rest and Relaxation):** Providing time for patients to relax, review, and recover
- Mobility (Physical, Occupational Therapy-PT/OT):** Involves dedicated time to improve patient's functional ability, promote safety and independence
- Mind:** Dedicated time for educational needs like managing the LVAD, dressing change, and dietary knowledge
- Monitoring:** Includes checking and charting of vital signs, daily weight, intake and output and diagnostic tests or procedures

Clinical Discharge goals of DMP-7 D's

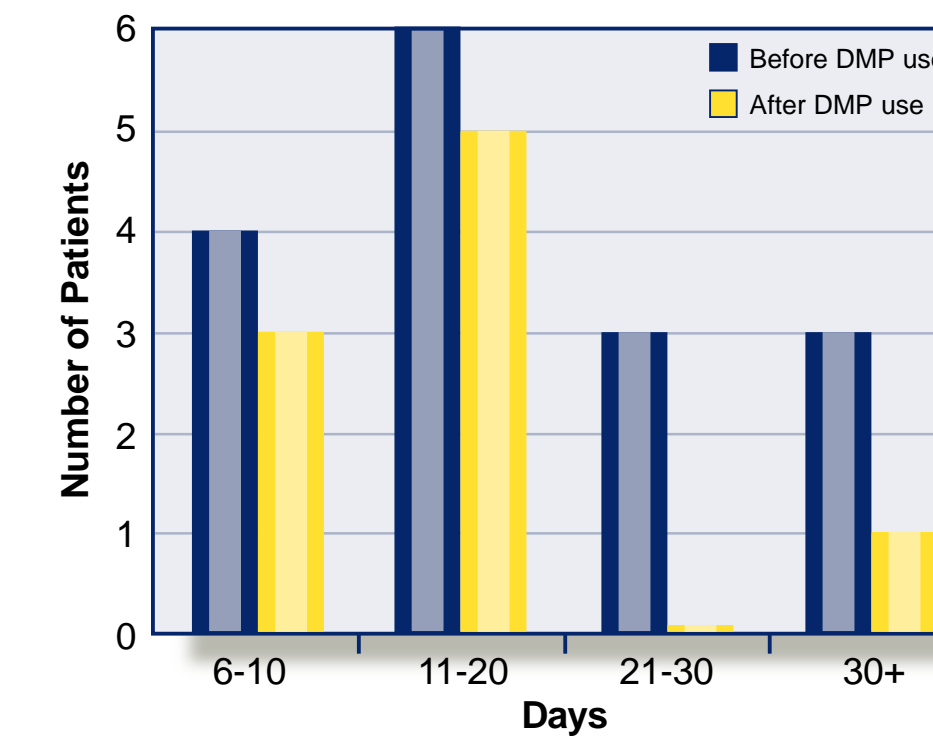
- Dry:** Patient should be euvolemic in comparison with the previous dry weight
- De-lined:** All central lines, PICC lines, chest tubes, mediastinal drains and Foley catheters should be removed prior to discharge
- Drips off:** Define all IV medications/drips that the patient is currently receiving and attempt to transition to oral meds when indicated
- Diet:** Every patient should be educated on their dietary and fluid restriction. The caloric requirement and the intake in percentage should be documented
- Dressing and LVAD certification:** Patient and their designated partner will be certified with competency in the use and management of their pump prior to discharge
- Dexterity:** Refers to patient's ability to ambulate safely, manipulate the pump and its connections and also involves early identification of patients for potential need for rehabilitation
- Discharge Planning:** Early identification of barriers and needs, daily communication, and care coordination for successful transitioning

Acknowledgements

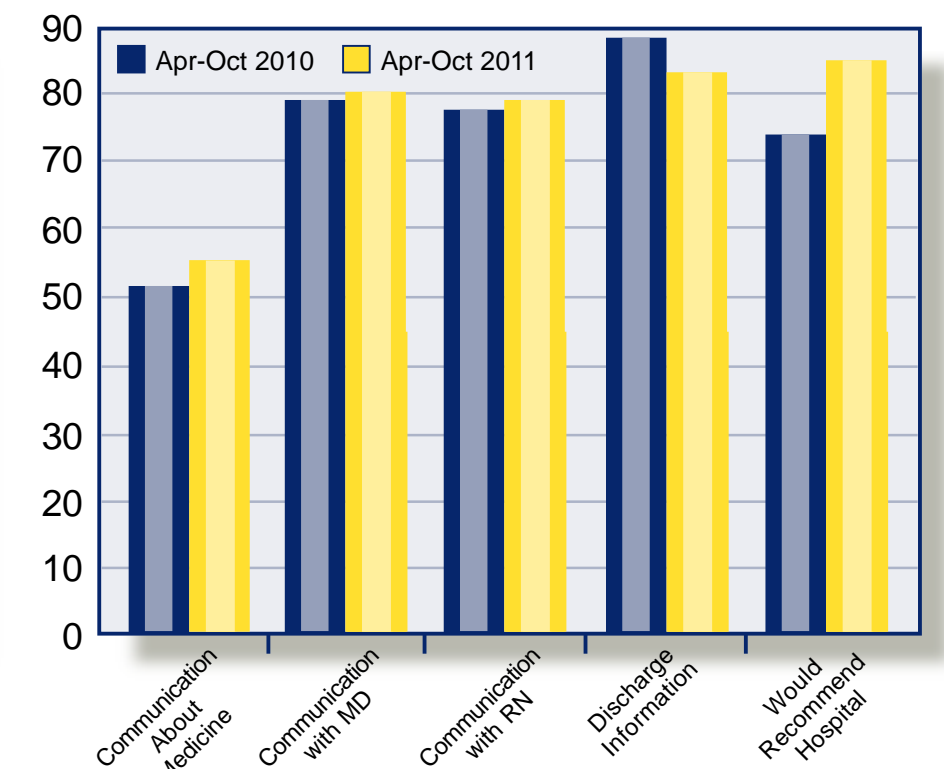
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Results

Evaluation of Patient's LOS Before and After DMP Use



Evaluation of Patient Satisfaction Score Before and After DMP Use



Conclusions/Implications for Nursing Practice

Based on our evaluation and outcomes:

- DMP provides structure and consistency in meeting daily POC and achieving discharge goals in decreasing LOS
- Continue using DMP with LVAD patients and extend its use with other heart failure patients
- DMP enhances effective use of resources in a timely manner
- Continue to monitor our outcome and effectiveness
- Celebrate our achievements

