

Background/Problem

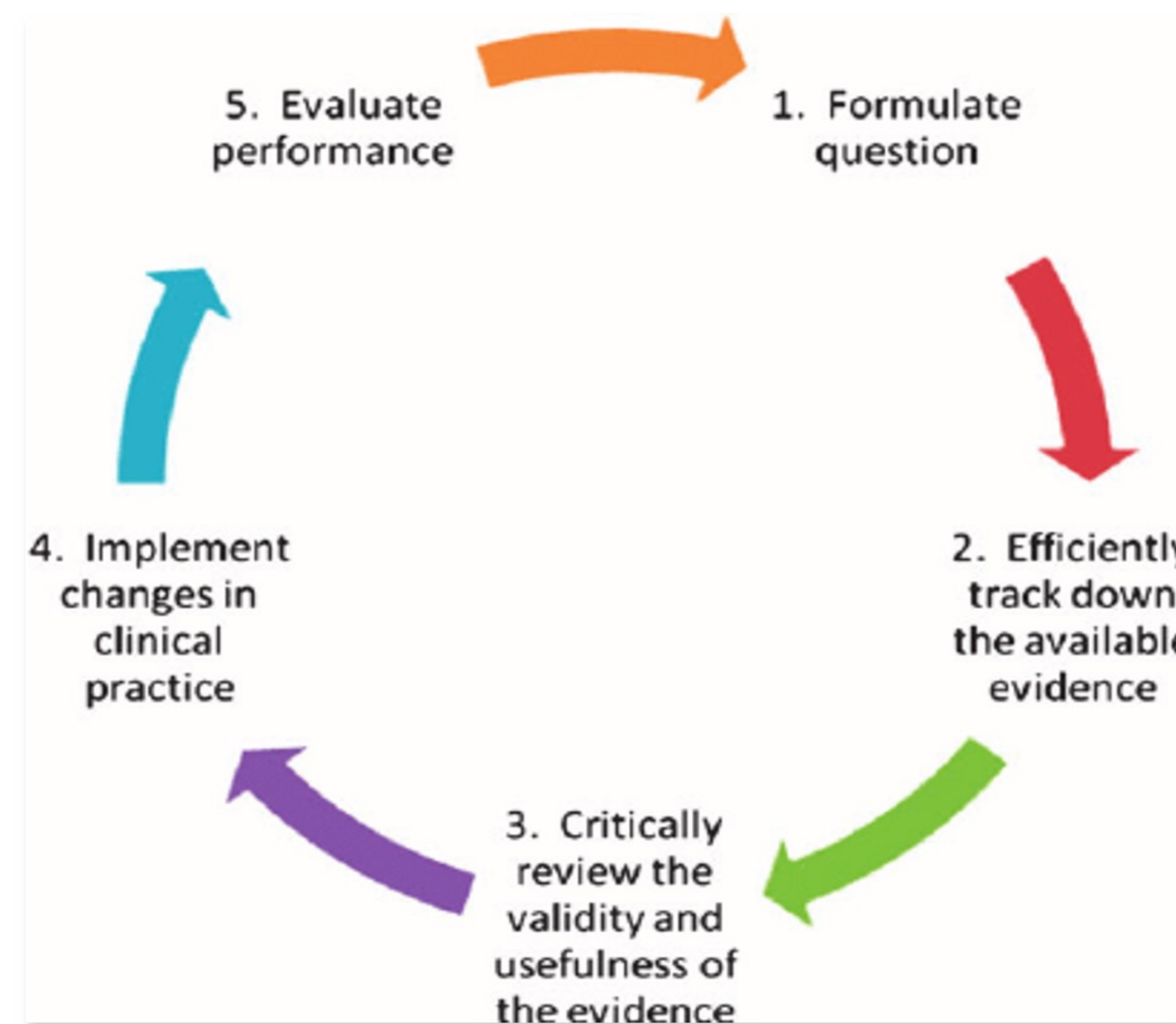
- The maintenance of normothermia during the perioperative period is documented to reduce the risk for healthcare-associated infections
- A combination of warming mechanisms have been introduced to reduce surgical site infections (SSI) thought to be related to incidental perioperative hypothermia (IPH)
- Lack of policy-guided perioperative normothermia maintenance had been identified within the participation organization after an increase of SSIs in conjunction with a lack of proper temperature documentation was noted.
- Policy development and implementation took place to improve normothermia maintenance and temperature documentation.

Purpose

- Develop and implement a perioperative normothermia maintenance policy and procedure
- Target population of adult patients located in rural Midwestern organization
- Expected Outcomes
 - A. Notation of thermoregulatory monitoring when indicated
 - B. Prevention of hypothermia
 - C. Reduction of SSI

Methods/Design

- Based on the Iowa Model quality improvement project theoretical framework, the project was implemented through practice intervention design
- Quality improvement data collection took place from October 24 through December 18, 2021
- Analysis regarding the documentation of patient temperature monitoring, ambient room temperature, and the occurrence of SSIs in conjunction with identifiable hypothermic events was then performed



THE IOWA MODEL

Setting & Sample

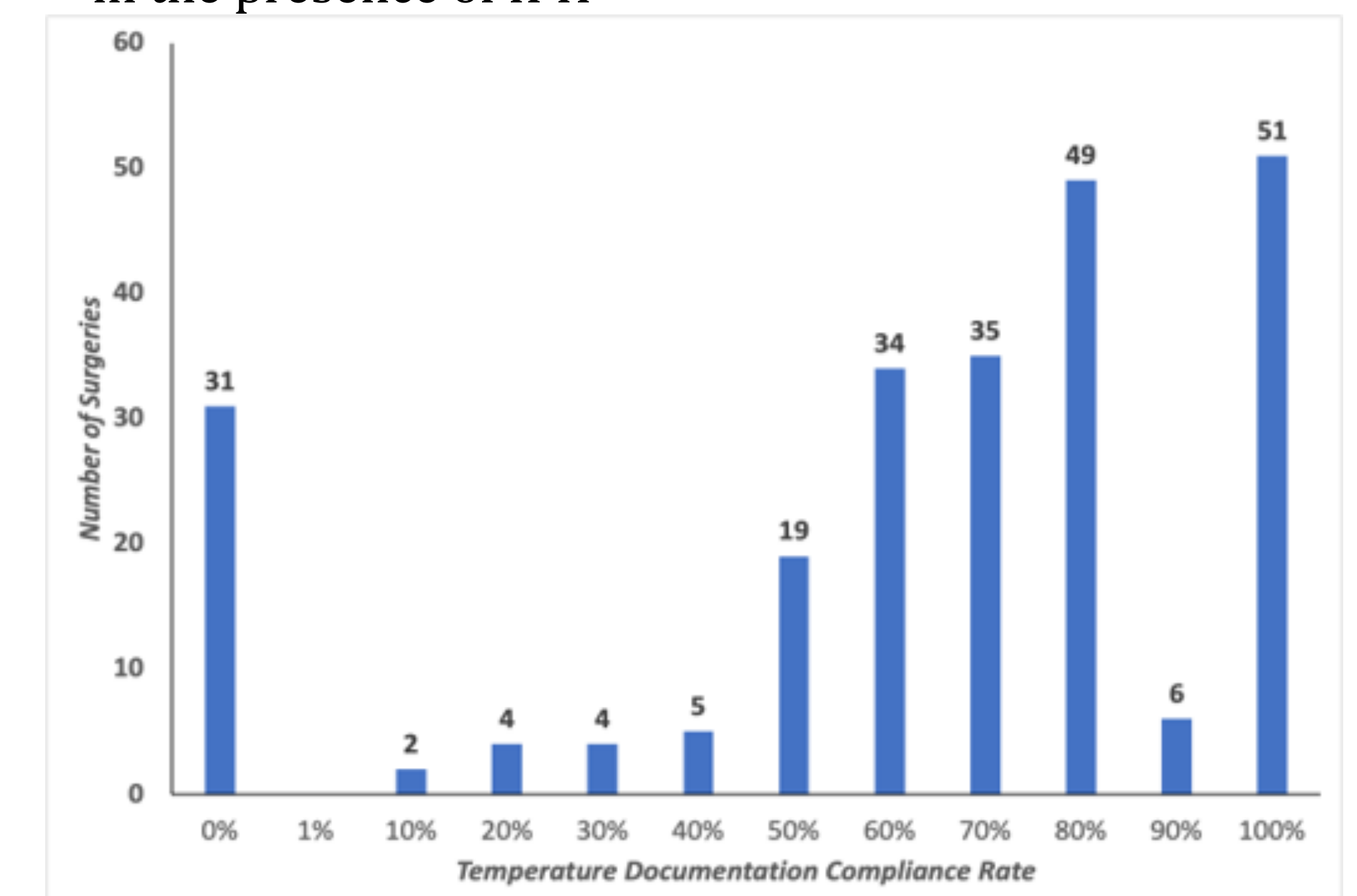
- One of 16 regional healthcare facilities as defined by the Iowa State Department of Health with 99 beds
- Intervention measurement occurred directly within the surgical suite; included all patients 18 years of age and greater enduring surgical procedures that lasted 30 minutes or longer
- Ambient temperature documentation was monitored within the five surgical suites and obstetrics cesarean section suite
- Patients identified as hypothermic during the perioperative period were then monitored for development of SSIs.

Data Collection

- Total number of cases requiring temperature documentation
- Incidence of hypothermic events, incidence of temperature documentation compliance, and ambient room temperature of each operating suite
- Incidence of SSIs post policy implementation in the presence of IPH

Results

- A total of 241 intraoperative cases required temperature documentation during the data collection period
- 78.8% of cases were void of total temperature compliance. Total temperature compliance incidence rate was 21.2%.
- A total of 51% (N=122) surgical cases had a documented temperature of less than 36°C
- A total of 53% (N=556) individual temperature readings were less than 36°C
- Ambient temperatures of OB/C-Section was 100% during live time and 100% during down time
- Overall ambient temperature regulation compliance is 6.8% of five OR suites, excluding the OB/C-Section suite.
- There was 0% incidence of SSI post policy implementation in the presence of IPH



Conclusions

- There were no SSIs identified in relation to IPH
- Post policy implementation, consistent and accurate temperature monitoring remains a challenge. Further intervention is indicated to increase compliance with normothermia maintenance and ambient room temperature.
- The organization has initiated the process for temperature capture improvement process and accuracy
- Further data collection would be indicated post implementation of accurate temperature capture process