

using evidence based practice (EBP) principles yet do not have the skills to initiate projects.

Objectives of Project: The goal of the project was to enhance the knowledge of perioperative/ perianesthesia bedside nurses about the EBP process.

Process of Implementation: A team was developed to devise an EBP education program for nurses in perianesthesia care units (PACUs) and operating rooms (ORs) across the health system. Before the initial session, a survey was sent to attendees to obtain information regarding current levels of knowledge regarding EBP. Nurses from PACU and OR with varying levels of education and three or greater years in their current job roles communicated definitions of what EBP means to them. Ongoing monthly presentations were then offered to staff to provide an overview of the EBP process. Successive sessions allow nurses to discover the many facets of EBP.

Statement of Successful Practice: The pre-project survey revealed knowledge deficits related to what the EBP process includes. The same nurses surveyed after the initial presentation indicated an increased general level of understanding of EBP based on an initial informal post-presentation survey. Staff revealed a new level of enthusiasm for initiating EBP projects and a strong desire to contribute to unit process improvements utilizing the process. The initial survey will be repeated at the completion of the project and results will be available for this presentation.

Implications for Advancing the Practice of Perianesthesia Nursing: Bedside perioperative and perianesthesia nurses will have an improved understanding of the EBP process, initiate projects, and implement changes more readily by utilizing this process. Perianesthesia and perioperative nurses will communicate findings through presentation and publication allowing other nurses to benefit from their efforts.

IMPLEMENTATION OF A CARDIAC SERVICE LINE

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Nursing staff in the department recognized a need for additional education to care for cardiac patients. This included cardiac pathophysiology, anesthesia care post-procedure, and interventions performed in the Cath Lab. The Cardiac Service Line was developed through collaboration with bedside nursing staff, leadership, and the cardiac procedural team to meet the educational needs of staff and provide quality care for our cardiac patients and families.

Objectives of Project:

- Improve the quality of care provided to cardiac patients by increasing staff knowledge and comfort of post-procedure care in the PACU

- Mentor staff when providing care to cardiac patients and "Champion" cardiac patient care by requesting to care for cardiac patients
- Engage in educational opportunities to improve knowledge and bring newly acquired knowledge to the unit to share with fellow champions and bedside staff

Process of Implementation: An initial meeting involving the HR/PACU leadership, nurse educator, and staff nurses interested in serving as champions initiated the implementation. This meeting established objectives of the service line, opportunities for growth/learning for service line members, and prioritized educational initiatives to fill clinical practice gaps. Clinical practice gaps were identified through staff rounding, an organizational reporting system, and conversations with the cardiac procedural team. Post meeting, targeted education was provided by the Champions, Cardiologist, and CRNAs during unit morning education sessions. Service Line Champions initially attended a recurrent Cardiac Lecture Series, spent observational time in the Cath Lab, and met with the cardiac procedural team; additional opportunities for growth are ongoing. Initially, meetings occurred monthly but have transitioned to every 3 months as the line has become established. At each meeting, current initiatives and education topics, future initiatives, and opportunities for professional growth are discussed.

Statement of Successful Practice: Purposeful and targeted education from nursing peers, cardiology, and anesthesia Team Members has helped bridge the gap in clinical practice and continues to improve the quality of care provided to our cardiac patients and families.

Implications for Advancing the Practice of Perianesthesia Nursing: Successful implementation of this initiative could lead to the creation of additional service lines for other perioperative specialties, populations, and roles.

PROVIDING COMPREHENSIVE CARE TO PATIENTS WITH EPIDERMOLYSIS BULLOSA IN THE PERIOPERATIVE ENVIRONMENT

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Background Information: The University of Minnesota Medical Center and Masonic Children's Hospital EB Center offers comprehensive multidisciplinary care to children with Epidermolysis Bullosa (EB). This is the only center in the United States to offer Bone Marrow Transplantation (BMT) as a treatment for EB. To determine candidacy, these patients come to the Operating Room to have their dressings fully removed, labs drawn, photographs taken and skin biopsies collected under general anesthesia. The child is transported to PACU and remains under sedation while dressings are reapplied, often a 2-3 hour process. Since these patients are at high risk for severe blistering skin injuries, it was evident that modifications to equipment, practice changes, and staff education needed to occur to keep them safe