

How to Develop a Evidence Based Protocol in Nursing; from a Researcher's Perspective

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Abstract

Protocol is 'the official procedure or system of rules governing affairs of state or diplomatic occasions.' or the original draft of a diplomatic document, especially of the terms of a treaty agreed to in conference and signed by the parties. The clinical protocols include Plan of care, Standard order set, Clinical pathways, Care algorithms, Decision trees and Bundles of recommended care actions. There are 11 steps in the development of Protocol. Evidence Based Protocols are Concise and clinically focused, Credible, Multidisciplinary and Up-to-date.

Keywords: Evidence Based Protocol; Nursing.

Introduction

EBP movement has both advocates and critics. Suppose argue that EBP offers a solution to a improving healthcare quality in cost constrained environments. EBP is viewed as a rational approach to providing the best possible care with the most effective use of resources. Advocates also note that EBP provides self directed lifelong learning that is essential in an era of rapid clinical advances and information explosion.

What is a Protocol in Nursing?

The dictionary meaning of a protocol is 'the official procedure or system of rules governing affairs of state or diplomatic occasions.' Or the original draft of a diplomatic document, especially of the terms of a treaty agreed to in conference and signed by the parties.

Clinical Protocols in Nursing

- Plan of care
- Standard order set
- Clinical pathways
- Care algorithms
- Decision trees
- Bundles of recommended care actions

What is an Evidence Based Clinical Protocol in Nursing?

It is set of care actions for a patient population that has been endorsed by the hospital, agency, clinic or health care facility. Protocols are not agency specific and contextual. Clinical protocols are standards of care that should be given to the patients who are part of a defined population.

Steps in the Development of an Evidence Basec Protocol in Nursing

1. Identify the problem.
2. Identify stakeholders and form a team.
3. Develop an action plan to include project goals and a timeline.
4. Review the available evidence and benchmark.
5. Examine current practice and identify gaps as well as best practices.
6. Develop the protocol and modify as needed, focusing on gaps.
7. Initiate the approval process.
8. Evaluate the availability of treatment options and modify as needed.
9. Educate the staff.
10. Implement the protocol.
11. Evaluate protocol safety, effectiveness, and adherence.

Table 1: Nursing care protocol for patients with a ventricular assist device

Action	Description
1. Clarification of the patient in relation to the risk-benefit ratio of the device	Aimed at providing humanized care and reducing patient anxiety
2. Equipment functionality monitoring Prevention of console-related problems.	Prevention of possible obstruction of the system.
3. Monitoring: HR, MAP, RAP, LAP, CO, HI, and SvO2.	Aimed at obtaining appropriate monitoring and clinical compensation.
4. Monitoring of pulse oximetry, urine output, and temperature.	Aimed at obtaining appropriate monitoring and clinical compensation.
5. Use of pressure relief mattresses to prevent pressure ulcers.	Redistribute and soften the pressure of a body on a surface and prevent skin injuries.
6. Maintenance of the patient in horizontal decubitus position and contraindication of changing of decubitus.	Avoid obstruction and/or rupture in the system used by the device.
7. Assessment of laboratorial exams such as gasometry, creatinine, urea, lactate, sodium, potassium, magnesium: 6/6 hours.	Analyze the occurrence of adverse prognoses, such as renal and respiratory changes and ineffective tissue perfusion.
8. Collection of total proteins and albumin, control of bilirubin, liver enzymes and amylase, fibrinogen and D-dimer: daily.	Analyze the occurrence of liver complications and coagulopathies.
9. Administration of prophylactic antibiotic therapy during the seven first days as prescribed.	Perform the prophylaxis of infections related to the surgical wound.
10. Collection of tracheal secretion culture and surgical wound culture: in case of presence of secretion.	Identify microorganisms that cause infections in the surgical wound for an appropriate antibiotic therapy, if necessary.

Characteristics of Evidence Based Clinical Protocol in Nursing

- Evidence-based
- Concise and clinically focused
- Credible
- Multidisciplinary
- Up-to-date

Conclusion

Once the EBP protocols developed next step is pilot test in clinical setting and evaluate the outcome. A variety of research strategies and designs can be used to evaluate the innovation. In most cases informal evaluation may be adequate. Qualitative information can also contribute to evaluation. Finally EBP team should develop a plan when new protocol will be reviewed and if necessary updated based on new research evidence.

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