

Use of Agitation Scale Decision Scoring Grid to Improve Care of Agitated/Anxious Patients in DSU

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Background

- Patient agitation is common in Intensive Care Units; if not managed effectively it has consequences for patients and professionals
- Many critical care nurses felt equipped to recognize delirium and agitation but did not feel they had the knowledge to support decision-making around acute agitation management
- An objective instrument for nurses to assess the degree of agitation/anxiety guides early initiation of treatment before the patient's behavior requires a Code Gray and/or restraints

Purpose

- To adapt the Agitation and Anxiety Severity Scale Scoring Grid to DSU to provide early intervention and early initiation of appropriate medication
- To decrease injury to patients & caregivers & reduce the use of hard restraints

Methods

- Design: Evidence-based practice
- Modified the 17-item Agitation Severity Scale Decision Scoring Grid and presented to hospitalists & NPs
- Anxiety Agitation Severity Scale training was developed using case studies as examples to help differentiate anxiety vs agitation
- Training provided to staff
- Clinical educator gave in-service to the head of the hospitalists and DSU NP's

Results

- 80% of staff trained on how to utilize the Agitation Scale Decision Scoring Grid
- Overall violent restraint hours decreased post intervention

Discussion

- Unable to obtain pre-data for the study
- Staff can use the scale and include it in their SBAR when calling the provider

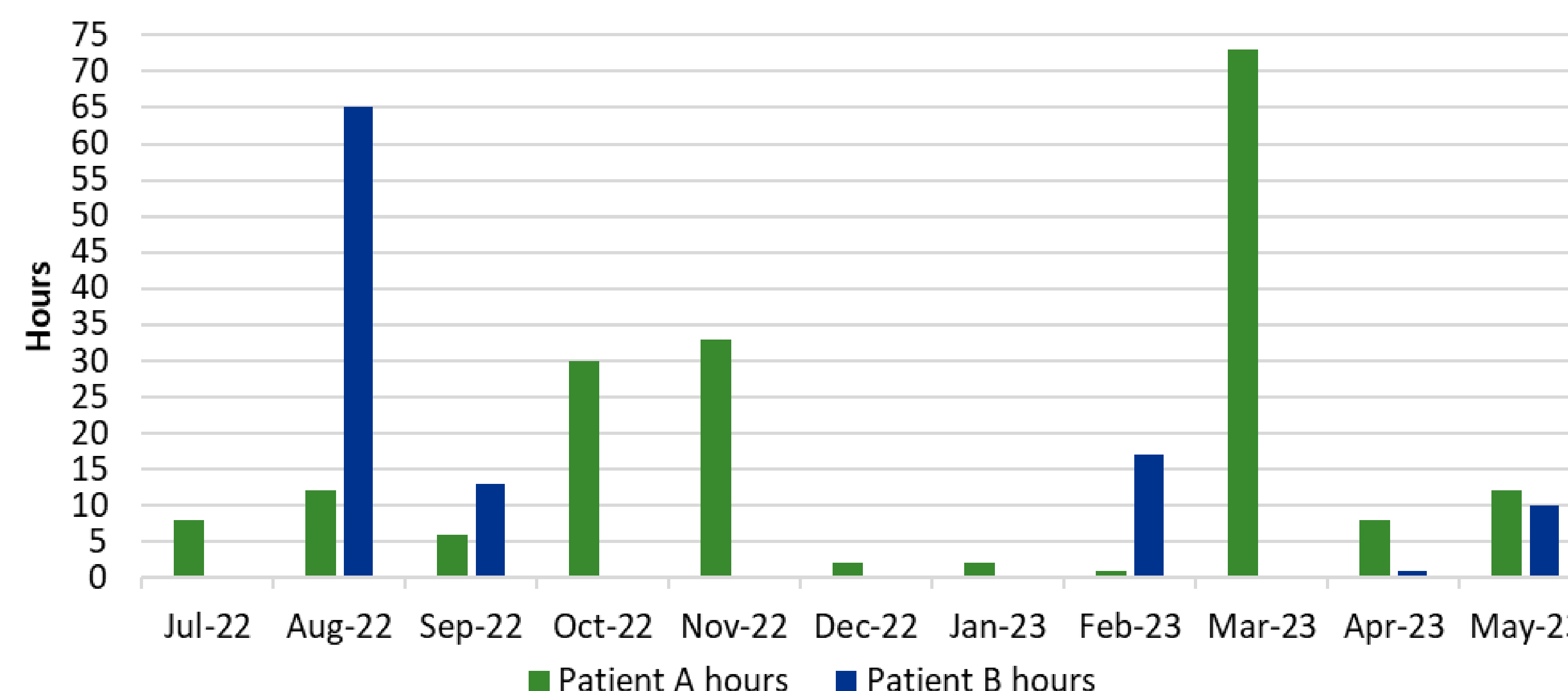
Implications for Practice

- Adapting an evidence-based tool from the emergency department provides an opportunity to improve hospitalized patients' care
- Patients will be medicated before agitation/aggression occurs
- This pilot project may have applicability for medical-surgical units throughout the institution

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DSU Patients in Violent Restraints



References available upon request.