IMPLEMENTATION OF EDUCATIONAL STRATEGIES FOR ICU NURSES

“ZAP the VAP”

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Poster Objectives
- Define VAP and implications
- Illustrate the process of successful implementation of an education program using technology and innovation
- Illustrate development of the oral care video
- Discuss staff education and implementation of VAP Bundle and Oral Care Procedure
- Demonstrate nursing educational material

What is VAP
VAP (Ventilator-associated pneumonia) is a common concern for critical care patients. Evidence suggests that comprehensive oral care serves as a valuable deterrent to pneumonia, reducing the incidence of VAP.

Background
VAP is the leading cause of hospital acquired infection, making it a common concern for critical care patients. VAP is a serious complication, particularly for patients receiving mechanical ventilation, with mortality rates ranging from 20% to 70%. The incidence can run as high as 65%.

VAP Implications
- VAP is the leading cause of death from hospital acquired infections.
- Oral care is defined as a form of nosocomial pneumonia that develops in patients receiving mechanical ventilation greater than 48 hours.

Staff Resource
- Staff education
- Oral care
- Staff nurses

Goals of Oral Care Video
- Discuss VAP and its implications
- Emphasize proper oral care techniques
- Discuss components of the VAP bundle
- Educate staff on incidences of VAP in the Critical care

Oral Care Wheel
- Oro-pharyngeal cleaning every 8 hours with oral care kit
- Suction oral cavity and remove debris. Use tongue scraper or toothbrush to remove film layer of debris of tongue.
- Using toothbrush and toothpaste, brush all surfaces of teeth, rinse and suction.
- Flush suction tubing after use
- Apply moisturizer to lips and mucoса
- Chlorhexidine Gluconate solution twice a day (10 and 10). Using a sponge swab dipped in chlorhexidine 0.12% oral solution, swab surface of teeth, gums, and tongue. Let sit for 30 second and suction excess.
- Oral care every four hours with sponge swab and water or saline to prevent xerostomia (dry mouth) and mucositis, suction saliva and debris from the oral cavity, then swab the mouth with water or saline to hydrate oral tissues.

Nurses Responsibilities
- Assess oral cavity and document
- Perform oral care and document
- Makes sure there is order for Chlorhexidine Gluconate
- Make sure there is order for DT/T prophylaxis
- Make sure there is order for PUD prophylaxis
- Make sure oral care kit available at bedside
- Make sure suction canisters are changed every 24 hours

References