

MAGNET Recognized 3177 AMERICAN NURSE CREDENTIALING CENTE

Babes Got S.H.A.D.E.S.

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Purpose

The purpose of this quality improvement (QI) project was to create a standardized process through the use of a standard work including evidenced based nursing interventions when caring for a patient

Implementation

A multidisciplinary team convened to initiate an evidencebased practice (EBP) project to implement best practices in decreasing light stimulation during mydriasis through the use of eye shields in conjunction with other non-pharmacological interventions. Nurses were further educated on the following

	Αι	ıdit T	ool			
Observ Unit: Date: Observer Na	vation tool for care 	e of a patie	nt underg	oing ROP Patient La	Exam abel here	
Process Step	Interventions	Completed (Verbalize/ demonstrate)	Not Completed	N/A why?	Comments/ Action corrected	
1.Comfort measures pre- exam	a.Dim lights once eye drops are placed b.Place eye shields after dilation (select correct size)	□ a. □ b.	□ a. □ b.	□ a. □ b.		

Standard Work	
	Nicklous Children's
Candard Work IIIIe: Care of a Patient undergoing Retinopathy of Prematurit	y Exam ^{Health} System
Standard work for caring for a patient having a Retinopathy of Prematurity Eye Exam	
Metrics: How will you measure performance of this process? .ength of stay	Total Process
	Time: Varied
JICU, PICU, CICU, Clinical Resource Nurse, any department where a patient meets cri f Prematurity Eye Exam	eria for Retinopathy
High Level Process Map	\frown
Criteria Exam/drops ordered and measures Dilate	Comfort

undergoing Retinopathy of Prematurity (ROP) exam to decrease clinical events related to mydriasis.



Objectives

- State the disorder diagnosed through a screening exam of the eyes performed on premature patients in the neonatal intensive care units (NICU).
- List at least three adverse effects

nursing interventions: Tetracaine application, oral sucrose use, swaddling, systemic absorption of eye drops/side effects, pacifier use, dimming the lights and use of eye-shields after eye drops are instilled for 4 – 6 hours after mydriasis forphoto sensitivity.

- The acronym S.H.A.D.E.S. was developed to provide a visual cuefor the nurses to facilitate recall of the expected nursing interventions. S, Swaddle;H, Havea Paci?; A, Apply Drops;D, Dim Lights; E, Eye Shields
- An icon was createdby the clinicalnursesand uploaded to our E-signage system which is utilized when apatient is wearing protective eye shieldsforeither bili-light usage or protection of the eyes related tophotosensitivity.
- Finally, aStandard Work: "Care of a Patient undergoing Retinopathy of Prematurity Exam" was created and educated onfor nurses to have an evidenced based standardized approachwhen caring for a patienthaving an ROP exam.



Process Step What you are doing?	Role What role(s) completes step?	(5) Details Picture, Diagram, or Description Tools, Materials, Equipment (What is needed)?			J Br do Ye /
1. Screen patients on admission	Clinical Resource Nurse	Inclusion Criter All infants < 1500 gra gestational aq < 30 v Selected infants with a 1500-2000 grams. All infants that the Ne be at risk. (i.e. unstat infection, & congenital Determine elig complete week with reason for	Varies	No	
2. Orders placed/ equipment placed at bedside	Clinical Resource Nurse	 Obtain face sheets for patient and last Opthalmalogy note if applicable Notify nurse of pending exam and dilation time Ensure all medication/NPO orders have been placed in Cerner Alfonso Speculum Tray and Calgiswab placed at bedside 		Varies	No
3. Comfort measures pre exam	RN	Dim lights once eye drops are placed Place eye shields after dilation Swaddle baby to instill drops		5-10 min	No
4. Dilate patient	RN	 35 weeks and under: Cyclomydril 36 weeks and above: Combo Drop Eye drops found in Pyxis in Zone 2 NICU Once drops have been administered infant is to remain NPO until after the procedure 		15 min	Ye
Approved by: Anylin Moreno, MSI	I, RN, CCRN		Role: Clinical Resource Nurse	2	
Associated Policy/Procedure: R	etinopathy of Prer	maturity		R(ev. v



Results / Outcomes

associated with mydriasis eye drops post retinopathy of prematurity (ROP) examination.

Identify evidenced based practice interventions that decrease rate of clinical events following ROP examination in the NICU.

Description

Retinopathy of prematurity (ROP) is a disorder that affects the retinal vascular development of low-birthweight preterm infants. It is a significant cause of blindness affecting at least 50,000 infants worldwide (Szigiato et al., 2019). Research has found that if ROP is detected early, long-term visual acuity can be improved, and our institution has a well-established program for ROP screening within the Neonatal Intensive Care Unit (NICU). Due to the specialized population and level of acuity, many patients are at risk for ROP and require frequent ROP screening eye exams. Mydriasis eye drops are required to be administered prior to the start of the exam. The drops are associated with adverse effects of apnea, acute gastric distention, feeding difficulties, & necrotizing enterocolitis (NEC). Given these possible side effects, a multidisciplinary team approach convened to initiate an evidence-based practice (EBP) project.

Based on the evidence, a standard work "Care of a patient undergoing Retinopathy of Prematurity exam" was developed and an in-service was conducted, educating all NICU and Float Pool clinical nurses. Education on adverse effects that can occur after administering mydriasis drops and on the evidence-based nursing interventions that should be implemented post ROP exam was completed. A survey was conducted before and after our interventions to evaluate if there was a decrease in clinical events when applying nursing interventions for comfort. A pre-survey was completed by 18 nurses, the questions included patient demographics, if any comfort apatient experienced any clinical events 4-6 hours post mydriasis. A post survey

was conducted to assess if the interventions implemented resulted in a decrease of clinical events for the patients undergoing ROP examinations. This practice change has demonstrated a significant reduction in the rate of patients with reported clinical events.



Conclusion / Implications

As the team reviewed all evidence, gaps and opportunities in practice, the need for an evidence-based practice change was identified. Through this process, we learned that nursing education would play a vital role in decreasing adverse effects in patients receiving mydriasis drops for ROP eye exams. The new interventions for care before, during, and after ROP exams in preterm infants were positively correlated with fewer clinical events, fewer bradycardic and apneic episodes as evidenced by clinical events reported and documented by the staff nurses.

References

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