Stepping Up to SCIP: Meeting Surgical Care Improvement Project (SCIP) Metrics in Step-Down Post-Operative Cardiac Surgery Blood Glucose Management

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Summary: Optimizing blood glucose levels after cardiac surgery has been studied and is associated with better patient outcomes, such as improved wound healing and reduced surgical site infections and mortality. This is an important aspect of care for patients undergoing major surgical procedures especially those undergoing cardiac surgery. However, research has also found that having blood glucose levels too tightly controlled (<110mg/dl) can lead to mortality from hypoglycemia.

Nursing Implications:
• In non-critically ill inpatients, optimal hyperglycemia management means using scheduled subcutaneous (SC) basal-bolus insulin which is supplemented with as-needed correction doses.
• Blood glucose monitoring (labs and point of care testing) should inform management.
• Using quality monitoring processes like the Plan, Do, Check Act can provide a systematic way to organize and evaluate practice changes based on new evidence and research.
• Evidence based practice and collaboration should drive management and nursing care.

Key Takeaways:
• Understand how the different types of insulin work.
• Trend patient blood sugars and monitor for hyperglycemia>180 mg/dl.
• Keep blood sugar targets in the immediate post-operative between 140-180 mg/dl. More aggressive targets under 120mg/dl is not necessarily better.
• Monitor for and prevent hypoglycemia.

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