Endoscopy Consent Completeness for Inpatients Having Procedures
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Problem: Incomplete consent forms for endoscopy procedures were observed prior to scheduled times for inpatients, raising patient safety and staff concerns.

Evidence: Majority of consent documents did not comply with hospital policy. Blank spaces, wrong physician or wrong diagnosis were some observed errors present on consent forms despite written physician orders.

Strategy: Surveys and education of staff was used in the project from December 2010 to December 2011.

Practice Change: Inpatient consent forms, as per hospital policy, were collected from December 2010 to January 2011 by endoscopy staff. Two floor units were chosen based on data collection as samples for surveys and education. A pre-education survey was given, education was provided to nurses, and data collection of consent documents was performed. One month was given to clinicians to educate staff prior to data collection, allowing staff nurses to learn and absorb information being taught. A post-survey was conducted and consents were collected for evaluation.

Evaluation: A pre-education survey was given in May 2011 to RN’s from CDU and Medical/Oncology. The post-education survey was repeated in October 2011 to RN’s from CDU and Medical/Oncology. Questions 2-4 showed a decrease in correct answers on both floors. Questions 5 and 6, showed some increase in correct answered questions. Post education consents collected showed a marked improvement in completion.

Results: A decrease in correct answers per question either means the education was insufficient or nurses remained unfamiliar with the policy. The consent form policy was revised due to the awareness generated from the project.

Recommendations: Further education needed to nurses on proper consent form completeness complying with hospital policy. A suggestion: mandatory reviewing of consent policy at least bi-annually for all nurses, especially agency, travel, float, PRN and shared-employee nurses.

Lessons Learned: Some nurses were unfamiliar with completing a consent document. Hospital policy needed revision; thus, an updated version was obtained. More education is highly needed.

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Bibliography: