Improved Timeliness of PRN Effectiveness Documentation
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Problem: VHSO policy outlines that reassessment following administration of PRN medication will be done and documented within 60 minutes. From May 2010 to April 2012, the average percent of compliance for documentation of PRN effectiveness within 60 minutes was 57%.


Evaluation: Data regarding PRN effectiveness documentation related to the administration time is obtained from the Veterans Integrated System Technology Architecture (VISTA) system and are analyzed and reported on a daily basis to nursing leadership.

Practice Change: Staff education regarding methods to print PRN effectiveness reports in VISTA and BCMA was provided. Electronic and face-to-face nursing staff education regarding appropriate timeframes for PRN effectiveness documentation conducted. Promotion of a team approach regarding assessment and documentation of PRN effectiveness placed in inpatient areas. Ward clerks began scheduling PRN effectiveness reports to run every 45 minutes for the entire 24 hour period each day. Nurse managers review PRN effectiveness reports and follow up with staff for corrections. Report routine and PRN effectiveness monitor process were revised. Unit based PRN effectiveness documentation compliance reporting initiated. Staff with identified trends regarding untimely documentation reeducated. Suggested change in policy that PRN effectiveness would be assessed within 60 minutes and documented within 75 minutes.

Results: From May 2012 to December 2012, the average percent of compliance for documentation of PRN effectiveness within 60 minutes was 89%. This was a 32% increase from May 2010. For that same timeframe, the average percent of compliance for documentation of PRN effectiveness within 75 minutes was 94%.

Recommendations: Continue to implement multi-level system improvement process. Continue to monitor and report PRN documentation compliance. Identify trends, and formulate action plans as appropriate.

Lessons Learned: Constant monitoring required. Focused 1:1 reeducation.

Bibliography: