Using the CAM-ICU Assessment Tool to Identify and Treat Delirious Patients
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Problem:
Patients in Intensive Care Units (ICU) may experience delirium related to medications, and changes in circadian rhythms. Our plan; to recognize and decrease the incidence of delirium by implementing evidence-based practice, to decrease the amount of sedative and narcotic medications used, and develop sleep schedules to allow more normal sleep cycles.

Evidence:
Literature validated use of the Confusion Assessment Method - ICU (CAM-ICU) for detection of delirium. Increased use of medications coupled with changes in circadian rhythms was shown to increase the incidence of delirium. Evidence resulted in development of a flow sheet utilizing the CAM-ICU Tool, followed by interventions to decrease delirium in both vented and non-vented patients.

Strategy:
Our hospital decided to initiate use of the CAM-ICU Tool for all ICU patients; upon admission, with change in mental status, and routinely two times daily to detect delirium. All patients would get treatments; lights on in daytime, uninterrupted sleep at night, and evaluation of need for sedatives and narcotics. We would provide “sedation vacations” for vented patients, and evaluate amount of medication needed for ventilator compliance.

Practice Change:
To achieve these goals nurses were educated on the incidence of delirium, need for detection and treatment, and use of the CAM-ICU tool. Sleep schedules were enforced, light schedules followed, and medications evaluated on each patient.

Evaluation:
In four months 263 patients were assessed using the CAM-ICU tool, 68 identified as having delirium, 23 exhibited improvements with nursing interventions.

Results:
Currently assessments are performed per protocol, day time lights and sleep times are enforced, and medications are reduced. Nurses are aware that delirium has a negative effect on patient outcomes.

Recommendations:
Continued education, reinforcement with use of the tool and support of positive change is necessary.

Lessons Learned:
Changing culture is difficult, nurses need to see a need and believe the result is beneficial for patients. Reinforcement is a constant process requiring diligence and leaders that believe in the change.

Bibliography


