

External Ventricular Drain (EVD) Management Post Insertion Clinical Pathway Report

Clinical Pathway 1st Quarter Report 2017

Data Collection Period: 01 January 2017 - 31 March 2017

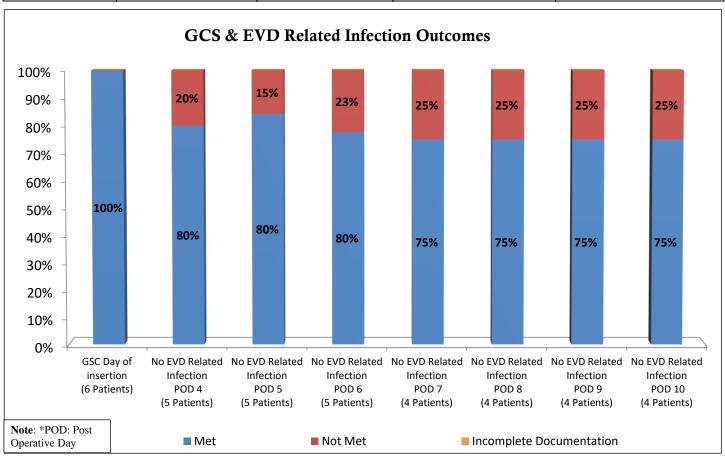
Units using the clinical pathway: C1, SSCU B, MICU C, PICU & A2

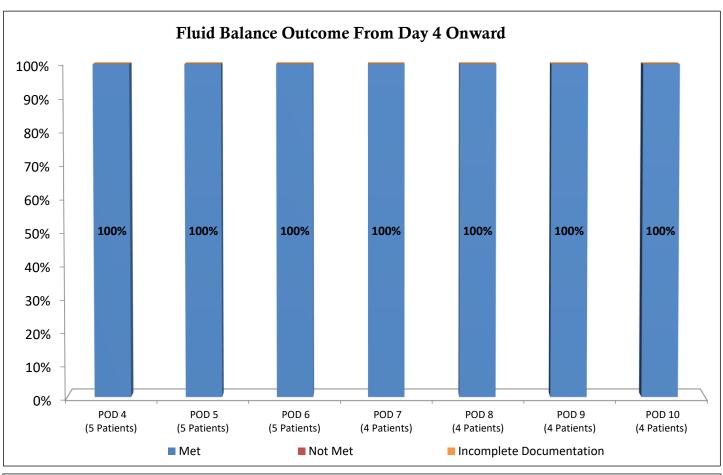
Data Sources: Retrospective review of Clinical Pathways

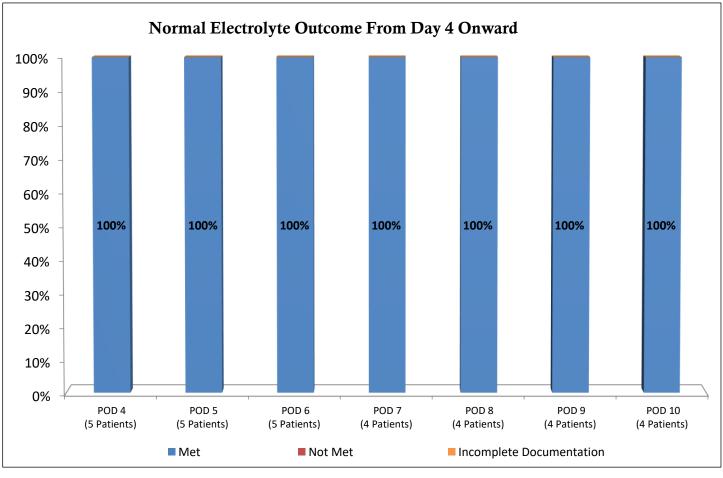
Number of patients who had EVD insertion: 6

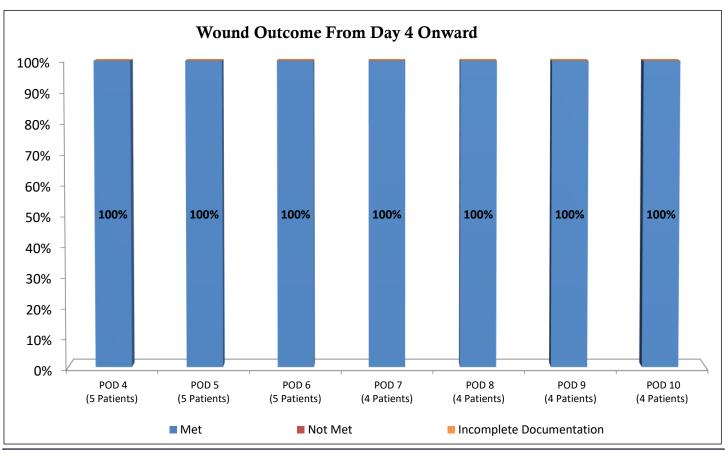
Number of patients managed on the Clinical Pathway: 6 (100%)

Clinical Pathway Documentation Compliance				
Discipline	No. of Adult Patients	No. of Peds Patients	Complete Documentation	Incomplete Documentation
Medical Doctor	2	4	100%	0%
C1 Nurse	1	0	100%	0%
A2 Nurse	0	2	100%	0%
PICU Nurse	0	2	100%	0%
SSCU-B Nurse	1	0	100%	0%

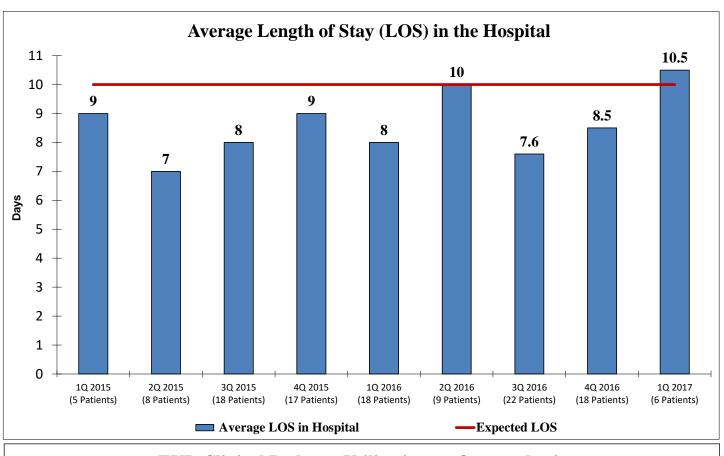


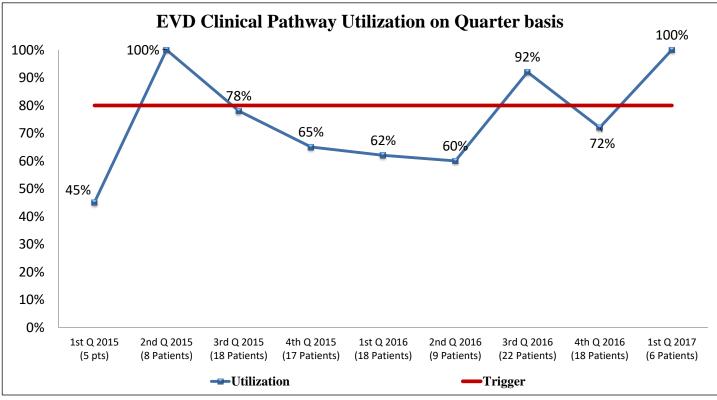


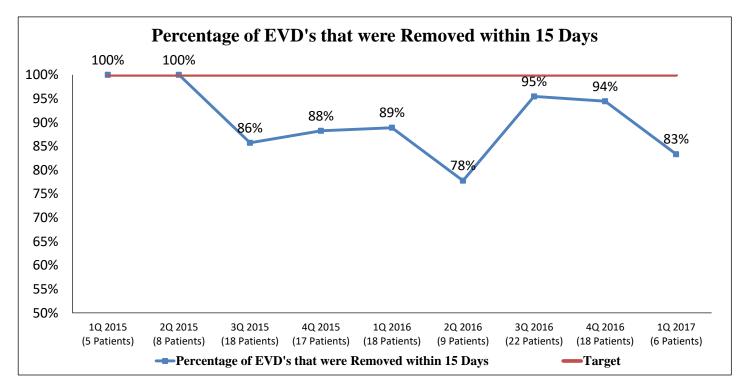




Status of all the Inserted EVD's who were put on the clinical pathway			
Day 4	One (1) EVD removed		
Day 6	One (1) EVD removed		
Day 11	One (1) EVD removed		
Day 12	One (1) EVD removed and replaced to VP Shunt		
Day 13	One (1) EVD removed		
Day 17	One (1) EVD removed		







Measure:

The long-term outcome for this clinical pathway is (100%) removal of all EVD's within 15 days.

Findings:

- 1. This quarter 83% of the EVDs were removed within 15 days (n=5 out of 6 EVDs)
- 2. This quarter utilization is excellent.

Action plan:

- 1. Continue monitoring the EVD tracking sheet that was established by SSICU-B to keep track of the patients with the pathway.
- **2.** The report to be shared with the respective Healthcare Provider/ Medical Quality Director / Clinical Pathway Coordinator
- **3.** Encourage the Healthcare Providers to utilize the clinical pathway nurse champion as a resource for any clarifications.

Recommendations:

- 1. Keep track of the pathways and pull them from the chart to be sent to MBC#19.
- **2.** Physician / Nurse champions to emphasize on the importance of EVD removal within **15 days** from insertion, if patient is Neurologically stable.
- **3.** EVD life span was extended to 15 days instead of 10 based on new evidence; consequently this will be reflected in the next revision of the clinical pathway.