

Sequential Compression Device Education in Post-Operative Spine Patients

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Sequential Compression Device Education in Post-Operative Spine Patients

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- Within the hospital environment, research has shown that DVT prophylaxis decreases the occurrence of deep vein thrombi among patients
 - Within 30 minutes of applying sequential compression devices (SCDs), the formation of clots can be prevented.
 - However, within 10 minutes of cessation of SCD use, effects return to baseline. This indicates that best use of the devices is to wear them continuously to prevent DVTs in the hospital setting.
- DVT events occur in 117 out of 100,000 people in the general population
- Surgical patients have an increased risk of DVTs
 - Surgical patients have a 29-60 percent chance of developing DVTs during the immediate post-operative period
 - Anticoagulation therapy such as heparin is often contraindicated in this population due to risk for bleeding
 - Population often sedentary due to pain, leading to increased risk for deep vein thrombi
- Nurses are the frontline of SCD use as they are most likely to encourage patient compliance in addition to having the opportunity to educate post-operative spinal patients on benefits of continued SCD use.

- RNs filled out a questionnaire on every shift with each post-operative spinal patient on 7ANS to determine SCD use
 - Selected RNs were part of a focus group that provided education to patients using a standard education sheet with specific points while all other RNs provided no educational intervention
- Education focused on benefits of SCDs as well as risks of non-compliance.
- Study took place over 2 week period. At the end of the study period, data was compared between patients who received no education to those that received the standard education.
 - Purpose: to determine if education increased compliance in SCD use



- Education provided by the focus group led to a 20 percent increase in compliance with SCD use.
- Education provided to patients was extremely well received
 - Patients in the educational group expressed support and desire for education to continue throughout hospitalization.
- There were fewer patients in the educational group (n = 12) versus the control group (n = 36), there were also fewer educators in the focus group as compared to overall staff on the floor.
 - Additionally, some crossover is believed to have occurred since patients were assigned to both members of the focus group as well as general floor staff (the control group)

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