

Telemetry Alarm Fatigue in Medical-Surgical Nurses

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Telemetry Alarm Fatigue in Medical-Surgical Nurses

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Background

- Telemetry monitoring is an essential skill for medical surgical nurses.
- A positive patient outcome is dependent on the nurse's skill at interpreting rhythms and responding to alarms.
- False alarms can sound throughout a nurse's shift, leading to alarm fatigue.

Purpose

The purpose of our project is to evaluate the nurses' knowledge of alarm settings pre and post education to decrease the number of nuisance alarms that lead to alarm fatigue.

Evidence

- Studies have shown that more than 85% of these alarms are considered false alarms (Sendelbach, 2013).
- The ECRI institute "identified alarm hazards as the number 1 issue in its list of 10 technology hazards" (Mitka, 2013).
- "In 2014, The Joint Commission established a National Patient Safety Goal to improve the safety of clinical alarm systems" (Alarm Fatigue Toolkit, 2014).
- Alarm overload can lead to desensitization and lack of response to alarms (Harris, 2011).

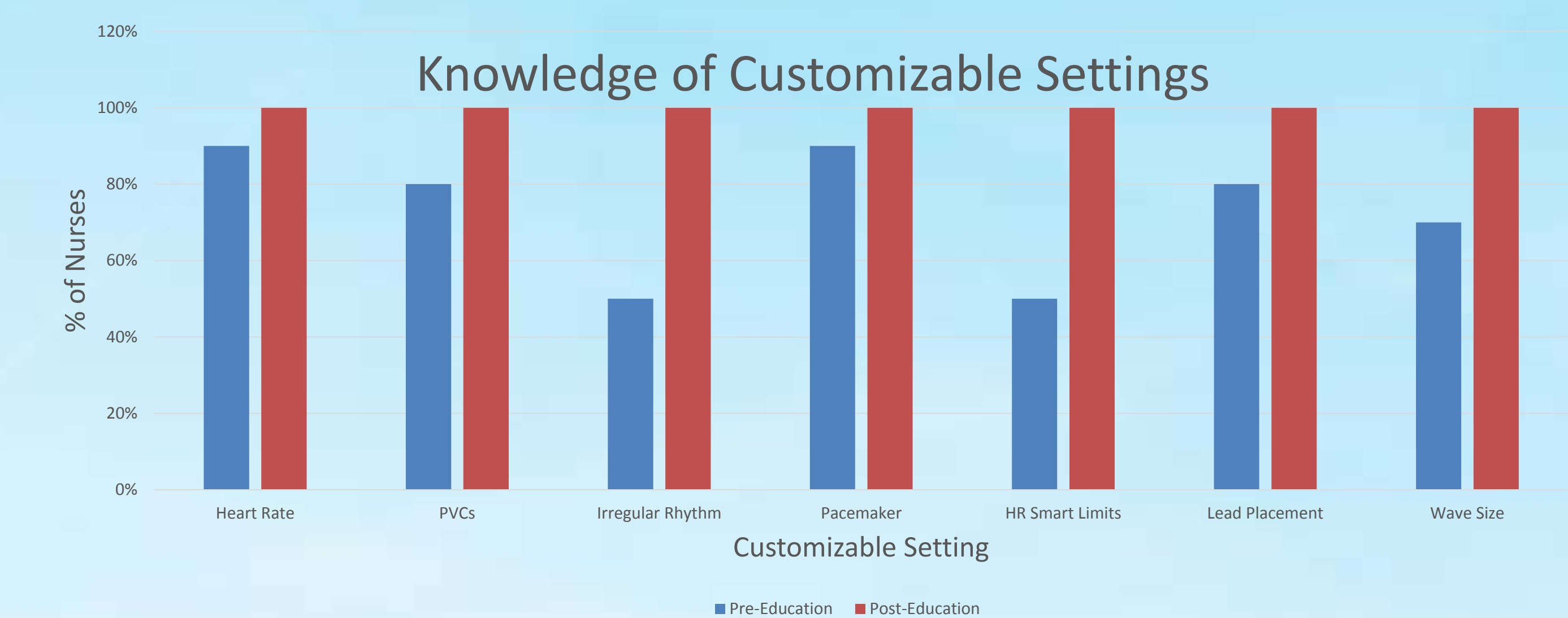
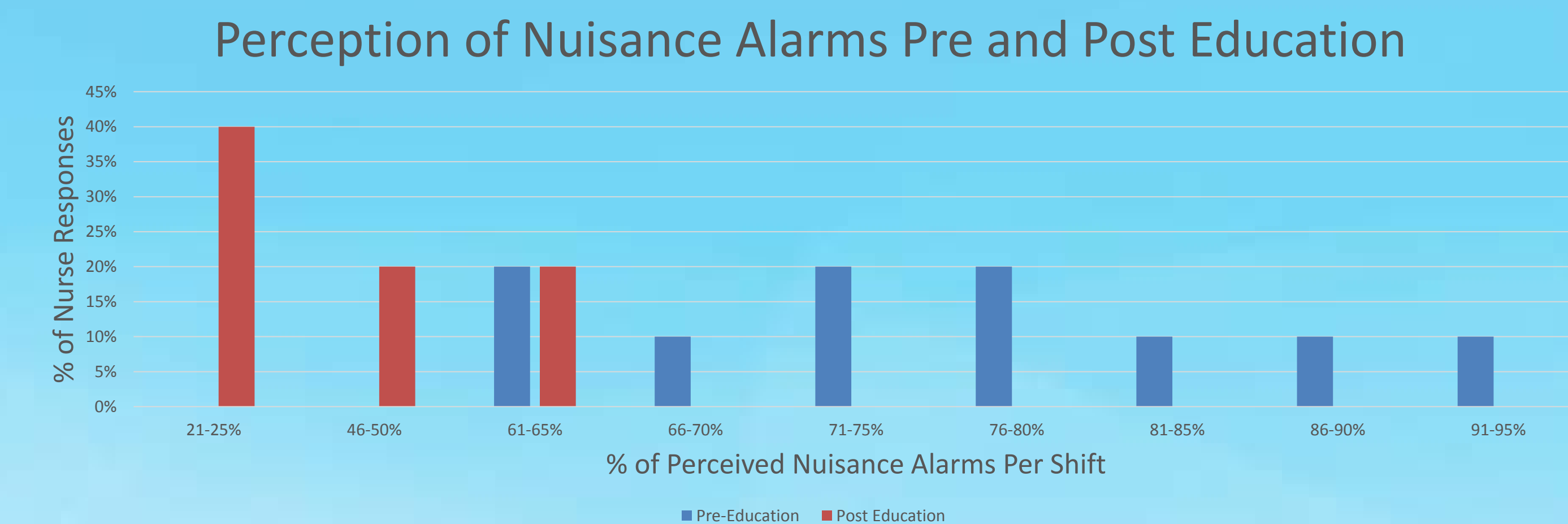
Implementation

- Nurses on 5CP were presented with a survey to gauge their perception of "nuisance alarms" and their knowledge of the LVHN telemetry monitoring protocol.
- Education regarding the adjustment of telemetry settings was provided to nurses by posting reference sheets at the telemetry monitors.
- Following the education, nurses were asked to complete the same survey and the results were compared.

Results

- The pre-education survey revealed that participating nurses perceived 60-95% of alarms to be nuisance alarms and had varying knowledge on customizable telemetry settings.
- The post-education survey revealed that participating nurses perceived 21-65% of alarms to be nuisance alarms and had full knowledge on customizable telemetry settings.

Outcomes



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