

Firelands Regional Medical Center School of Nursing  
AMSN- 2023  
Quality Scavenger Hunt Clinical

The student will participate in a quality assurance review pertaining to Ventilator-Associated Pneumonia (VAP), Catheter-Related Bloodstream Infections, and Catheter-Associated Urinary Tract Infections (CAUTI). This clinical experience will be completed following the Cardiac Diagnostics clinical (see clinical schedule). The experience will consist of chart review, compliance monitoring, and recording of findings. Amy Rockwell will be available by phone during this clinical experience. The completed documentation is due on Friday at 0800 in the "Quality Scavenger Hunt" drop box the week of the clinical. Refer to the folder, "AMSN 2023 Quality Scavenger Hunt" under Resources in Edvance360. The document will be reviewed for completion and forwarded to Sydney Cmar, RN, Infection Control and Elaine Fitzthum, RN, Quality Assurance.

**Instructions:**

- This clinical experience will consist of **non-COVID** patients only.
- This is a 2H clinical experience with a 1H CDG.
- You will spend time on **4C (and 4P dependent upon 4C census)** in order to complete this assignment. Inform the Charge Nurse when you arrive on each unit that you are there to do the Scavenger Hunt (**4C- 5862; 4P- 5872**)
  1. You will begin on **4C** and review each non-COVID patient that is on a ventilator (they will also have some type of IV and possibly a Foley Catheter- review those at the same time). Utilizing the patient chart, Meditech, and bedside review you will record the information included on the checklist.
  2. If there are no ventilator patients on **4C** you will review patients that have a Foley Catheter, Central Line (including Triple/Quad Lumen Catheter, Port and Dialysis Catheters), and Peripheral IV in place (which should be every patient). Utilizing the patient chart, Meditech, and bedside review you will record the information included on the checklist. If there are limited applicable patients on **4C**, you will then proceed to review of the patients on **4P**.
  3. When filling out checklists, you will indicate "Y" for Yes and "N" for No.
- Refer to the folder, "AMSN 2023 Quality Scavenger Hunt" under Resources on Edvance360 for additional resources.
- In order for a "yes" to be indicated on the checklist **all** corresponding documentation must be correct in Meditech.
- Contact Amy Rockwell if you have questions or concerns (419-202-2461)

**Concurrent Quality & Infection Control  
Precautions Monitoring: VAP**

UNIT: 4C DATE: 4/5/23	Ventilator Pt. #1	Ventilator Pt. #2	Ventilator Pt. #3	Ventilator Pt. #4
Head of Bed at least 30 degrees	Yes	Yes	Yes	Yes
Sedation Vacation attempted today	No	No	Yes	No
Peptic Ulcer Disease Prophylaxis	Yes	Yes	Yes	Yes
Deep Vein Thrombosis Prophylaxis	Yes SCDs Heparin	Yes SCDs	Yes SCDs	Yes SCDs Heparin
Oral Care every 2-4 hours today	Yes	No/Not eligible(?) Tracheostomy Ventilation	No	Yes
Turn and reposition every 2 hours today	No	No	Yes	Yes
Suction documented twice / shift	Yes	Yes	No	Yes
Daily chest x-ray to verify placement of NG/OG/ET tubes	Yes	No Last XR to confirm placement on 4/3/23. Patient has no insurance coverage and is not eligible for Medicare/Medicaid. I wondered if this may have contributed to this finding.	Yes	Yes

Today= since midnight

**Concurrent Quality & Infection Control  
Precautions Monitoring: CAUTI**

UNIT: 4C DATE: 4/5/23	Foley Catheter #1	Foley Catheter #2	Foley Catheter #3	Foley Catheter #4
Foley catheter type (Foley, Coude, 3-way, etc.)	Foley	Foley	Foley	Foley
Insertion date and time labeled on bag Y / N	No	Yes	No	Yes
How long has it been in place? <u>Circle/highlight</u>	≤ 1 days <b>1-2 days</b> 2-3 days > 3 days	≤ 1 days 1-2 days 2-3 days <b>&gt; 3 days</b>	≤ 1 days <b>1-2 days</b> 2-3 days > 3 days	≤ 1 days <b>1-2 days</b> 2-3 days > 3 days
Tubing & bag below level of bladder Y/N	Yes	Yes	Yes	Yes
Is the drainage bag touching the floor?	No	No	No	No
Stat Lock in place	No	No	No	Yes
Green clip secured to bed	No	No	No	No
No dependent loops	Yes	Yes	Yes	Yes
TES present & intact (red tag on tubing)	No	No	No	No
Documented Pericare q 24 hrs.	Yes	Yes	Yes	Yes
Reason for Foley documented by nursing	Yes	No	No	Yes
Meditech: insertion date & location (today) *	Yes	Yes	Yes	Yes

Today= since midnight

**\*Insertion date and location correctly documented with each Urinary Catheter Management Intervention**

**Concurrent Quality & Infection Control**  
**Precautions Monitoring: Catheter-Associated Bloodstream Infections**

UNIT: 4C DATE: 4/5/23	IV Pt. #1	IV Pt. #2	IV Pt. #3	IV Pt. #4
IV type- Central Line- TLC, Midlines, Hemodialysis (pigtailed), Peripheral	1. <b>R forearm</b> 2. <b>L forearm</b> 3. <b>L antecubital</b> All Peripherals	1. <b>L forearm</b> 2. <b>L antecubital</b> 3. n/a All Peripherals	1. <b>R jugular,</b> central line 2. <b>R femoral,</b> hemodialysis 3. <b>R forearm,</b> peripheral	1. <b>R forearm,</b> peripheral 2. <b>L forearm,</b> peripheral 3. <b>L jugular,</b> central line
How long has it been in place? ≤ 4 days, > 4 days	1. ≤ 4 days 2. ≤ 4 days 3. ≤ 4 days	1. > 4 days 2. > 4 days 3. n/a	1. ≤ 4 days 2. ≤ 4 days 3. ≤ 4 days	1. ≤ 4 days 2. ≤ 4 days 3. ≤ 4 days
Dressing current (7 days) Y/N	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. n/a	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>
Dressing clean, dry, and intact Y / N	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>no</b> 3. n/a	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>
Initials noted on dressing	1. <b>yes</b> 2. <b>yes</b> 3. <b>no</b>	1. <b>yes</b> 2. <b>yes</b> 3. n/a	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>
Date noted on dressing	1. <b>yes</b> 2. <b>yes</b> 3. <b>no</b>	1. <b>yes</b> 2. <b>yes</b> 3. n/a	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>
Time noted on dressing	1. <b>yes</b> 2. <b>yes</b> 3. <b>no</b>	1. <b>yes</b> 2. <b>yes</b> 3. n/a	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>	1. <b>yes</b> 2. <b>yes</b> 3. <b>yes</b>
All IV tubing labeled	<b>No</b>	<b>Yes</b>	<b>Yes</b>	<b>No</b>
All IV tubing current (24 or 96 hours)	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
All unused ports or peripheral lines clamped	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
All unused ports have alcohol impregnated caps (Curocaps) in place	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
IV stabilization device in place	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>
Flushing of each port documented q8h	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>Yes</b>
Cathflo given if sluggish or no return documented per port	<b>Not eligible</b> All indicated as patent with good return or had IV infusing with each documentation	<b>No</b>	<b>Not eligible</b> All indicated as patent with good return or had IV infusing with each documentation	<b>No</b>
Meditech: Insertion date, gauge, and care documented on each IV assessment (today)	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>	<b>Yes</b>

Today= since midnight

Please feel free to add any additional comments that may be helpful to Sydney Cmar:

Name: Rebecca Lamons, SN

Date: April 5<sup>th</sup>, 2023