

Cardiac Telemetry: Literature Review

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Cardiac Telemetry

Cardiac telemetry is overused, increasing health care costs, false alarms, and length of stay of patients in hospitals. Patients are kept on telemetry longer than required due to a lack of awareness by health care providers. Telemetry overuse leads to increased patient care costs and a shortage of telemetry beds (Rizvi et al., 2017). The purpose of the literature review is to become aware of the current telemetry issues and develop a new theoretical framework to address those issues by incorporating evidence-based practice. It is, therefore, inevitable to cease overusing telemetry to benefit the US economy positively.

Reducing over-utilization of cardiac telemetry with pop-ups in an electronic medical record system

Cardiac telemonitoring is regularly used in a non-ICU setting such as the medical-surgical floor, leading to increased patient care costs and hospital expenses. The primary purpose of this quantitative article is to incorporate pop-up reminders in the electronic medical record (EMR) to reduce telemetry usage. According to the author, the per-day expense of one patient with telemetry monitoring is 1400 \$ (Rizvi et al., 2017). The use of a pop-up reminder will prompt health care providers to know when to cease the treatment. Telemetry is an effective technology to decrease patient mortality rates, but continuous cardiac telemetry increases hospital stay and reduces patients' satisfaction rates.

Key Points

Cardiac telemetry is used to prevent arrhythmia, but it is often overused, causing stress and anxiety to patients due to increased length of stay and hospital costs. Three hospitals in Kansas incorporated pop-up reminders in EMR from 2015 to 2016 (Rizvi et al., 2017). This protocol resulted in a decrease in the use of telemetry by 37 percent (Rizvi et al., 2017). This method effectively decreases telemetry usage, false alarms and is a compelling reminder to health care providers to stop the telemetry. The use of pop-up reminders in EMR should be implemented in US hospitals to decrease hospital costs and save millions of dollars in health care.

Assumptions

Cardiac telemetry is an effective way to prevent cardiac comorbidities such as arrhythmia. However, its overuse causes harm to patients because it lengthens the patient's stay, resulting in a shortage of telemetry beds. The article emphasizes adapting the simple method of using pop-up reminders to stop telemetry when not needed. The statistical results showed a reduction in the use of telemetry by 37 percent after implementing pop-up reminders (Rizvi et al., 2017). The average number of days before using this method was 3.61 days, decreasing to 2.68 days (Rizvi et al., 2017). The idea of this protocol is so simple that it is like setting a timer to turn off the stove when finished cooking. This article provides a brilliant idea of reducing telemetry in the health care system, decreasing patients' medical care costs.

Deficit/Conclusion

The usage of pop-up reminders is an excellent way of reduction in telemetry usage in non-ICU settings. The article described the implementation of pop-up reminders in three hospitals in Kansas, which decreased patients' length of stay from 3.61 to 2.68 days and an overall decrease of 37 percent of telemetry usage during the two years (Rizvi et al., 2017). The

positive statistics convinced this student nurse to agree with the author's implementation of pop-ups. If nursing practice fails to accept pop-ups, the telemetry will continue to be overused, resulting in compromised patient care and increased health care costs. The limitation of the article is that it is confined only to hospital settings and beyond the scope of a private practicing physician. It is, therefore, crucial to incorporate pop-up reminders to reduce telemetry overuse in all hospital settings to save millions of dollars in health care expenses and flourish the US economy.

Second article title here

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Key Points

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Assumptions

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Deficit/Conclusion

Paragraph goes here discussing the conclusion of the article. Follow the MEAL paragraph formatting and use Grammarly.com. Do you accept the authors' line of reasoning? What are the implications for this article? If nursing fails to accept this line of reasoning, what would the implications be?

Third article title here

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Key Points

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Assumptions

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Deficit/Conclusion

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Conclusion

Write a conclusion here in your overall paper. Follow the MEAL paragraph formatting and use Grammarly.com. Provide a summary/conclusion of the analysis of all three articles.

Discuss how the information can improve:

- Patient outcomes
- Nursing practice
- Evidence-based practice/Quality Improvement efforts
- Healthcare as a whole

References

Albright, C., & Whelan, P. (2019). Learning reflection: A nursing student recounts her experience with a medical emergency team. *Alberta RN*, 67(6), 27. www.nurses.ab.ca.

*As you can see the reference is centered and is not bolded. The first line is NOT tabbed over, all other lines are, this is called hanging indentation. All references are double spaced. All sources should be listed in alphabetical order. Be sure to use the APA 7th edition and guide for your reference page.