

# BEDSIDE HEARTS

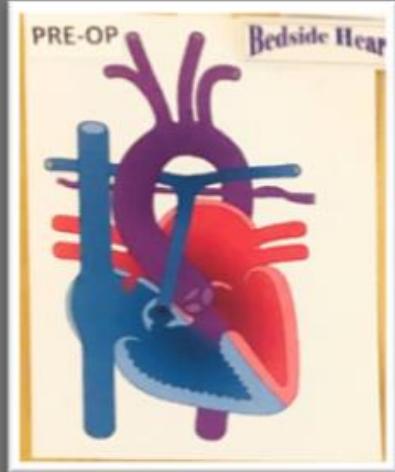
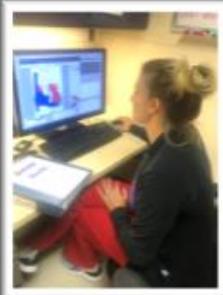
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## BACKGROUND

- The survival rate for congenital heart patients has increased significantly due to advances in cardiac intensive care and cardiac surgery/interventions (Jenkins & Larsen, 2016).
- The CICU team recognized that congenital heart disease (CHD) education at the bedside can be challenging in a high acuity setting.
- Bedside Hearts was developed to resource clinicians in a fast-paced environment.
- This tool provides an illustration of the patient's cardiac anatomy before and after intervention.
- The diagrams are utilized to support CHD education for direct care providers and families.
- Per the Nottingham Model, accepted health care practices must be challenged in order to develop innovative skills and knowledge to support and develop pediatric practitioners (Smith, 1995).

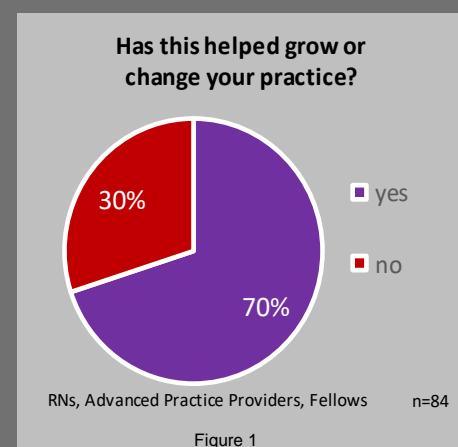
## OBJECTIVE

Provide a resource diagram tool that is readily available for bedside clinicians to further develop their knowledge of congenital heart defects.



## METHOD

- A RN Team leader was assigned to the project and prepared a diagram for each patient.
- The diagrams are placed at each patient's bedside and readily available for teaching.
- The project began with a few simpler cardiac defects pre-operatively.
- The congenital heart diagram is placed at each patient's bedside upon admission.
- The bedside nurse reviews the diagram and will seek out resources for further clarification.
- We expanded on the project to include post-surgical or post intervention hearts.
- Post-procedure, the diagram is updated with the repair changes.



## RESULTS

- The Bedside Heart tool is utilized by clinical staff and has increased real time teaching.
- Families request these diagrams to increase their own knowledge on their child's defect. Therefore, the diagrams promote family-centered care.
- The RN Team Leader has created a nurse-led work group to support the increase demand for all patients to have bedside heart diagrams.
- A post project survey was conducted. Results demonstrated that 70% of bedside clinicians voiced that bedside hearts helped or changed their practice. (See Figure 1)

## CONCLUSIONS

- Bedside heart diagrams have improved cardiac defect education and supports direct care providers to confidently teach congenital heart defects that are individualized to each patient.
- Families are intrigued by the visual diagrams and prompted to ask more specific questions about the patient's anatomy and diagnosis.
- The diagrams follow the patients throughout their hospital stay. Therefore, the educational process is ongoing.
- Bedside Hearts are migrating outside of the CICU to overflow areas such as the NICU.
- Bedside Hearts have promoted individualized treatment plans.

## REFERENCES

- Illustrations referenced from <http://www.chd-diagrams.com>
- Jenkins, K., & Larsen, S. H. (2016). Survival after interventional treatment for congenital heart disease improving. Retrieved May 5, 2019 from <https://www.healio.com/cardiac-vascular-intervention/structural/news/online/>
- Smith, F. (1995). *Children's nursing in practice: The Nottingham Model*. Hoboken, NJ: Wiley-Blackwell.