

BEST PRACTICE IN BLADDER MANAGEMENT FOR THE PARTURIENT RECEIVING LABOR ANESTHESIA

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- 1. Purpose/Aims/Research Question:** The overall aim of this study was to facilitate the application of best practice of bladder management for the parturient receiving labor anesthesia into nursing care on the labor and delivery unit.
- 2. Background:** Pre-survey data collected at Lucile Packard Children’s Hospital showed a variation in current practice among care providers in methods of bladder emptying for patients with an epidural. Currently no policy and procedure exists at LPCH concurrent with the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) clinical practice guidelines for nursing care of the woman who is receiving anesthesia in labor. Pre-survey results showed there was minimal nurse awareness as to the recommendations of care in the parturient receiving labor anesthesia. Inconsistency exists between the multi-disciplinary team. Anesthesiologists were comfortable with patients ambulating to the bathroom with an epidural, however nurses were not comfortable in safely ambulating a patient. Pre-survey results demonstrated that there was a 15% likelihood of the nurse to assist a patient to ambulate to the bathroom to void.
- 3. Methods:** Identical pre and post surveys were administered to nurses working in the labor and delivery unit regarding current practice methods of bladder management for a woman receiving labor anesthesia. Two methods were used to receive quantitative data from this survey; the likert scale as well as a measurable thermometer scale. Practice change included education to the nurse of the AWHONN standards and the use of the James Modified Bromage Scale. Education occurred through huddles, one-to-one discussion, bulletin board postings, and emails.

4. Results:

| Question | Pre Survey Rating (n= 30) | Post Survey Rating (n= 30) |
|---|---------------------------|----------------------------|
| Knowledge of AWHONN Standards | 15% Strongly agree | 65% Strongly Agree |
| Importance of incorporating best practice into current nursing practice | 100% Strongly Agree | 100% Strongly Agree |
| Knowledgeable in safe ambulation of their patient | 7.6 | 9.2 |
| Likely to assist patients with an epidural to walk | 4.6 | 5.2 |

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| Walking as the primary way to empty their patient's bladder | 15% | 30% |
| Use of indwelling Foley catheter as the primary way to empty their patient's bladder | 80% | 65% |
| Use of straight catheter method as the primary way to empty their patient's bladder | 5% | 5% |

On the survey nurses' enquired about the appropriate catheter to use if a patient was unable to ambulate.

5. **Discussion:** Education increased awareness, and resulted in a 50% change in practice. Nurses' became aware of best practice, however still hesitated to ambulate their patient with an epidural due to fear of patient falls. With the use of the James Modified Bromage Scale assessment tool that was promoted through this study, there has been no reported falls.
6. **Implications/Conclusions:** There is a need to continue to educate and encourage appropriate assessments to nurses, as well as a need to encourage the assistance of their patient to the bathroom to void as indicated by the post survey. There is a need for further research on appropriate catheter use in the field of labor and delivery, due to the lack of research in the current evidence.

Key Words: Labor and Delivery, Ambulate with an Epidural, Bladder Management of the Parturient.