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Caring for patients receiving therapeutic hypothermia post cardiac arrest in the intensive care unit

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Abstract

Survivors of ventricular fibrillation cardiac arrest have poor and often devastating neurological outcomes, despite advances in resuscitation techniques and services. In an effort to increase survival rates, improve neurological outcomes and reduce mortality for surviving patients, clinical trials have shown that a mild state of therapeutic hypothermia (32°C to 34°C) has been linked to improve patient outcomes post cardiac arrest. Many hospitals in Canada currently use therapeutic hypothermia (TH) but the nursing care requires advanced nursing knowledge and skills. In an effort to prepare registered nurses to care for patients receiving TH, a specially designed education program was implemented at the Rouge Valley Health System Hospital (RVHS) in Ontario. Busy nurses need flexibility in the delivery of programs in the clinical setting, and this program was designed to meet that need with a combination of self-paced modules, lectures, discussions and a return demonstration. In this article, the authors discuss the nursing care of post cardiac arrest patients receiving TH, and the design and implementation of the education program.

Biography

Glen Gardner (RN, B.Sc. N, MN) has completed his Master of Nursing degree from Memorial University of Newfoundland. His career encompasses nearly 20 years of acute, emergency and critical care nursing. He is currently a staff Nurse at Rouge Valley Health System working in Arrhythmia Services and ICU/CCU. He was the lead in implementing and educating ICU staff at the RVAP campus on protocols for therapeutic hypothermia post cardiac arrest. He has recently published an article in the Canadian Journal of Cardiovascular Nursing.

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