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Decreasing The Incidence Of Postoperative Delirium In The High Risk Elderly Population: A Plan For Translating Best Practice Guidelines Into Anesthesia Practice.

Abstract
Postoperative delirium is a potentially life-threatening change in cognition that occurs approximately 24 to 72 hours after surgery and is a frequent complication affecting the elderly population. The development of this postoperative complication has been found to increase mortality and morbidity, prolong hospital stays, and has also been associated with a steady decline in cognition. With the number of individuals 65 years or older predicted to increase over the next two decades and the incidence of postoperative delirium potentially affecting over 50% of postsurgical elderly patients, preventive anesthetic methods must be investigated. In early 2015 the American Geriatric Society published postoperative delirium guidelines that could potentially decrease this postoperative complication. With the aid of the Stetler model of research utilization and John Kotter’s 8-stage process for leading change an implementation plan was developed to assist with successfully translating the guidelines into practice and diminish the occurrence of postoperative delirium.