Abstract
Research has shown that post-operative nausea and vomiting (PONV) is a significant contributing factor to extended recovery times and unwanted hospital admissions following ambulatory surgery. The purpose of this DNP project was to assess current practice regarding administration of dexamethasone for the prevention of PONV, provide information based on best practice guidelines, and assess willingness to change practice based on the guidelines set forth by the Society for Ambulatory Anesthesia (SAMBA). Administration of dexamethasone is aimed at decreasing the incidence of PONV, optimizing PACU times, and increasing patient satisfaction regarding perioperative care.
An electronic presentation and survey were emailed to members of the Mississippi Association of Nurse Anesthetists (MANA) for the purpose of educating anesthesia providers about current evidence guiding PONV prevention as well as assess current practice of members. Results were analyzed using descriptive statistics. The majority of CRNAs surveyed were found to administer dexamethasone in accordance with the guidelines set forth by SAMBA. It was also found that the CRNAs surveyed displayed a willingness to change their current practice when provided with an evidence based alternative aimed at optimizing patient outcomes.
The results in combination with the guidelines set forth by the Society for Ambulatory Anesthesia were used to make recommendations meant to improve patient outcomes following surgery. These recommendations were disseminated to members of The Mississippi Association of Nurse Anesthetists (MANA) through email as well as the MANA website.