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A Snapshot of Evidence-Based Nursing Practice: A History of Progress

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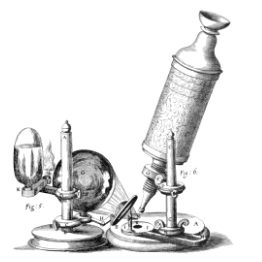




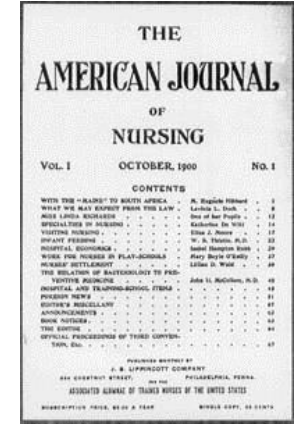

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A Snapshot of Evidence-Based Nursing Practice: A History of Progress

Jennifer DeBerg, OT, MLS; Clinical Education Librarian, Hardin Library for the Health Sciences; University of Iowa Libraries

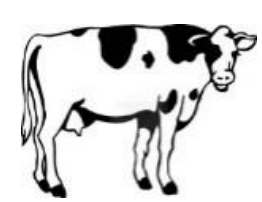
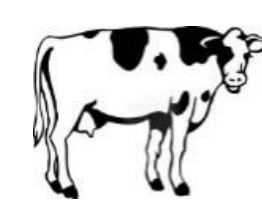
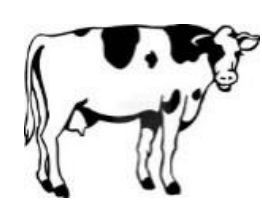
Precursors to Evidence-Based Nursing Practice

1600's and 1700's	1800's	1900-1940	1940-1980
<p>Rise of hospital nursing during reformation. Hospitals are dirty, and staffed by unskilled female nurses (1600's)</p> <p>Development of microscope and discovery of bacteria (1630-1720)</p> 	<p>Opening of first hospital in colonies: Pennsylvania Hospital (1751)</p> <p>Nightingale pioneers holistic care model. She also collects and analyzes data for policy change (~1858)</p> 	<p>Ether and chloroform used for anesthesia (1846 and 1847)</p> <p>Nightingale's <i>Notes on Nursing</i> is published (1860)</p> <p>Semmelweis enforced hand washing in obstetrical unit, resulting in 90% reduction in death rate (1848). He was ridiculed by peers.</p>  <p>Germ theory is accepted in late 1800's, rubber gloves introduced in 1891</p>  <p>Many instruments developed: hypodermic needles, stethoscopes, bronchoscopes, thermometers (1800's)</p>  <p>Focus on nurse education rather than training, expanding standardization of education (1890-1940)</p>  <p>AJN launched (1900)</p>	<p>Drugs and vaccine development: polio, cortisone, antibiotics have great impact (40's and 50's)</p> <p>Drugs and vaccines development: insulin, penicillin sulfonamides, diphtheria, pertussis, tuberculosis, and tetanus (1920's)</p> <p>Great Depression results in loss of jobs in public health nursing (1929-1932)</p> <p>US government establishes nursing research office (1955)</p> <p>First nurse practitioner program (1965)</p> <p>Many nursing theories developed (60's-80's)</p> <p>NCLEX for competency assessment (early 80's)</p> 

A Glimpse of the Evidence Base for Nursing Practice: 1980 to Present

Evidence-based nursing interventions: the larger bolded font indicates stronger evidence. Color indicates start of research on topic: aqua= before 1985 purple= 1985-1990 green= 1991-1995 blue= 1996-2000 grey= 2001-2000 orange= 2006- present

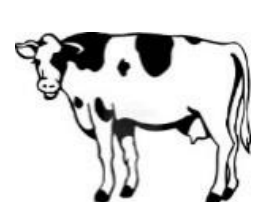
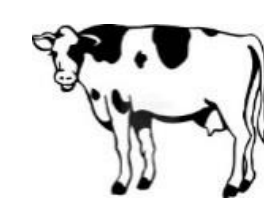
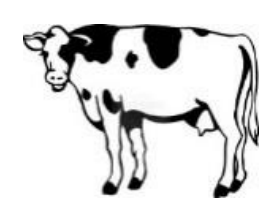
Use universal precautions	concrete preoperative teaching	keep bed and clothing clean for skin integrity	contact isolation	multifactorial interventions for fall prevention	protective dressings for stage I ulcers	therapeutic touch to reduce pain and anxiety
reduce noise to promote sleep	assess for signs of pain in non-verbal patients	preoperative hair removal by clipping	rotational therapy for prevention of ARDS	smart pumps for high risk medication administration	chlorhexidine for VAD dressing changes	Verify PICC placement
distraction for local pain	minimize use of urinary catheters	Prompt to increase fluid intake	Ice chips for mucositis prevention	assess for pain with simple scale	regular foot inspection	early activity for DVT prophylaxis
rapid response teams	oral or tympanic temperature measurement	acupressure to reduce nausea	bundles for reducing HAI rates	Mindfulness meditation for anxiety	reduce pain to promote sleep	reality orientation for dementia
ventrogluteal site for IM injection	use specialized IV team	SCD for DVT prevention	hydracolloid dressings for stage 2 ulcers	HOB elevated to 30-45 degrees for tube feedings	EMLA for localized pain	measure heart rate with radial pulse
chlorhexidine for IV insertion	open visiting policy for cardiac patients	external rewarming for hypothermia management	antiembolism stockings to prevent DVT	pressure relieving support surface for patients on bedrest	aseptic technique for IV insertion	



The Sacred Cow Movement in Nursing

"A long habit of not thinking a thing wrong, gives it a superficial appearance of being right"

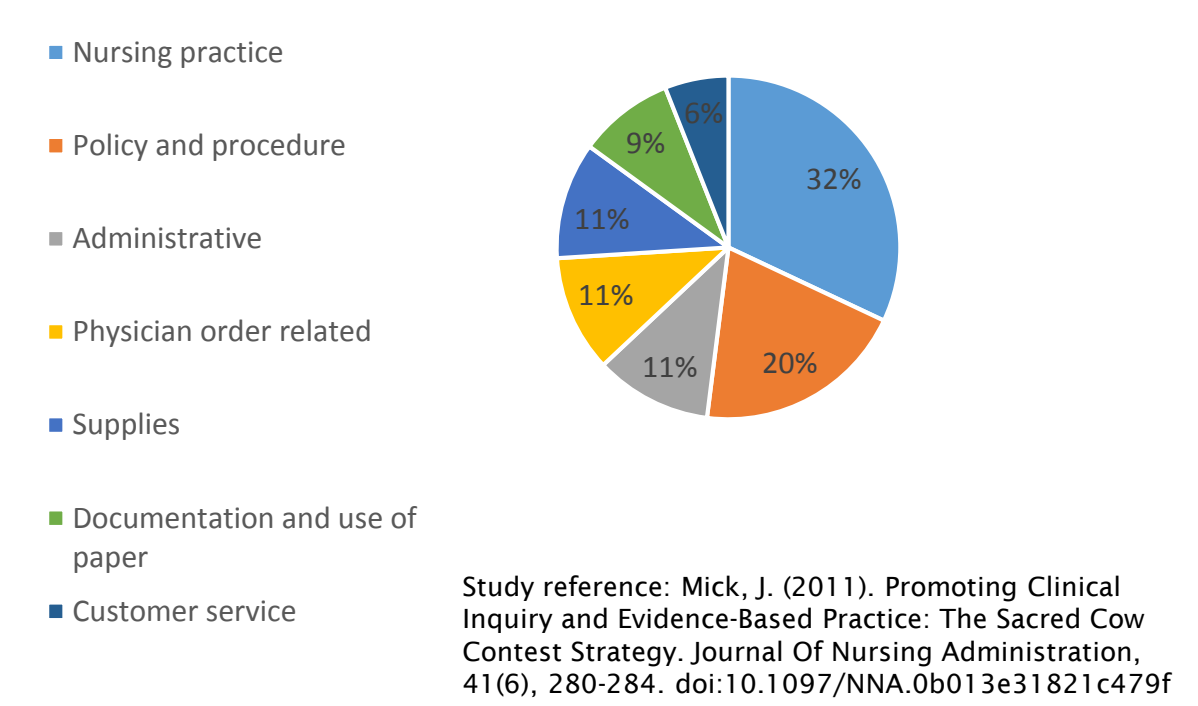
Thomas Paine, Common Sense, 1717



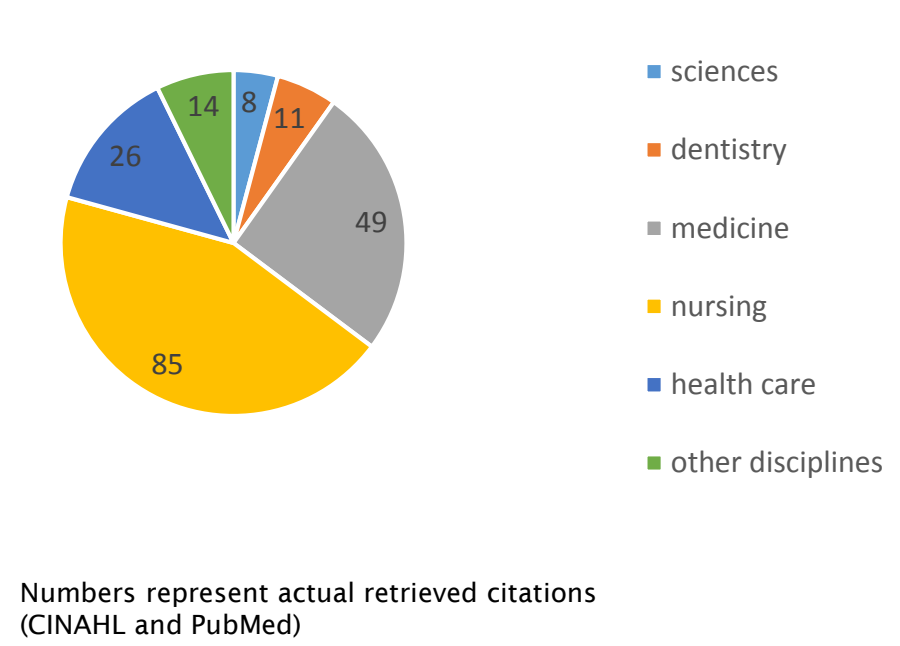
Sacred Cow Examples from Literature

- Trendelenburg positioning for managing hypotension
- Use of rectal tubes for fecal incontinence
- Measuring gastric residual volume to reduce aspiration risk
- Restricting visitation policies
- Use of cell phones in critical care areas
- Instillation of normal saline before endotracheal suctioning
- Using basins for bed baths
- Inconsistent approach to CAUTI prevention
- Using same size blood pressure cuff for all patients

Sacred Cows: Areas of Impact



Articles about Sacred Cows?



Tactics for Challenging Sacred Cows

- contests
- posters
- exhibits
- journal clubs
- blog posts



Poster presented by Kirsten Hanrahan at the 20th Annual National Evidence-Based Practice Conference, Iowa City.



Planter at University of Iowa Hospital and Clinics Magnet event