

Over-View of TH at Hospital

Hospital had a TH protocol that was not consistently utilized Interprofessional team developed a strategy which consisted of stakeholders and a taskforce

The taskforce assisted with process improvement and education/training

Re-education and training was conducted May through August of 2014

Scholarly Project

Had issues with data collection

Changed direction as a pre and post-intervention

Pre-intervention consisted of patients that received TH during the months of January to April (2014).

May-August: intervention (TH training & education)

Post-intervention consisted of patients that received TH during the months of Sept. to Dec.

Minor revisions to the protocol

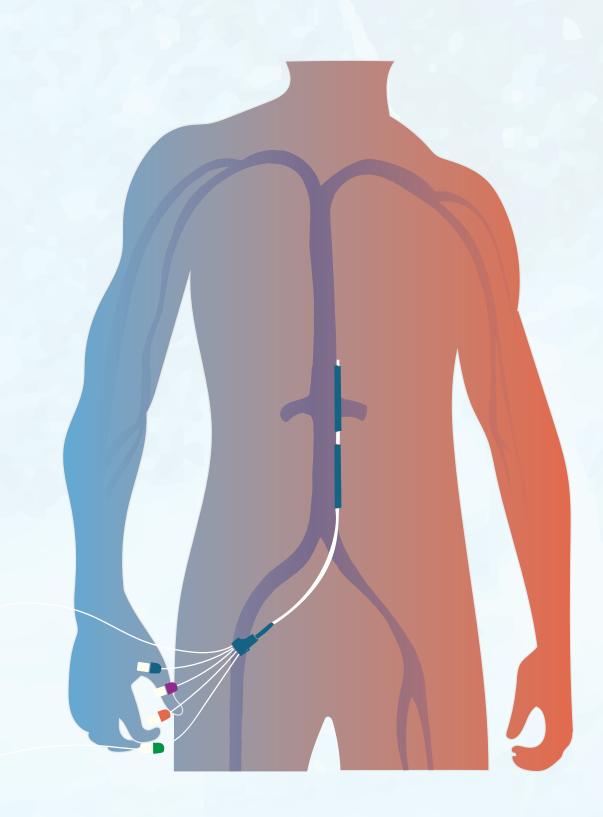
Physician Champion: neurologist

Changes to process

Cath lab was included in the training

ED and ICU developed a TH tote that contained: equipment, protocol and a checklist

ICU utilized the checklist because these patients are 1:1 care and the first few hours of cooling and rewarming which is intense.

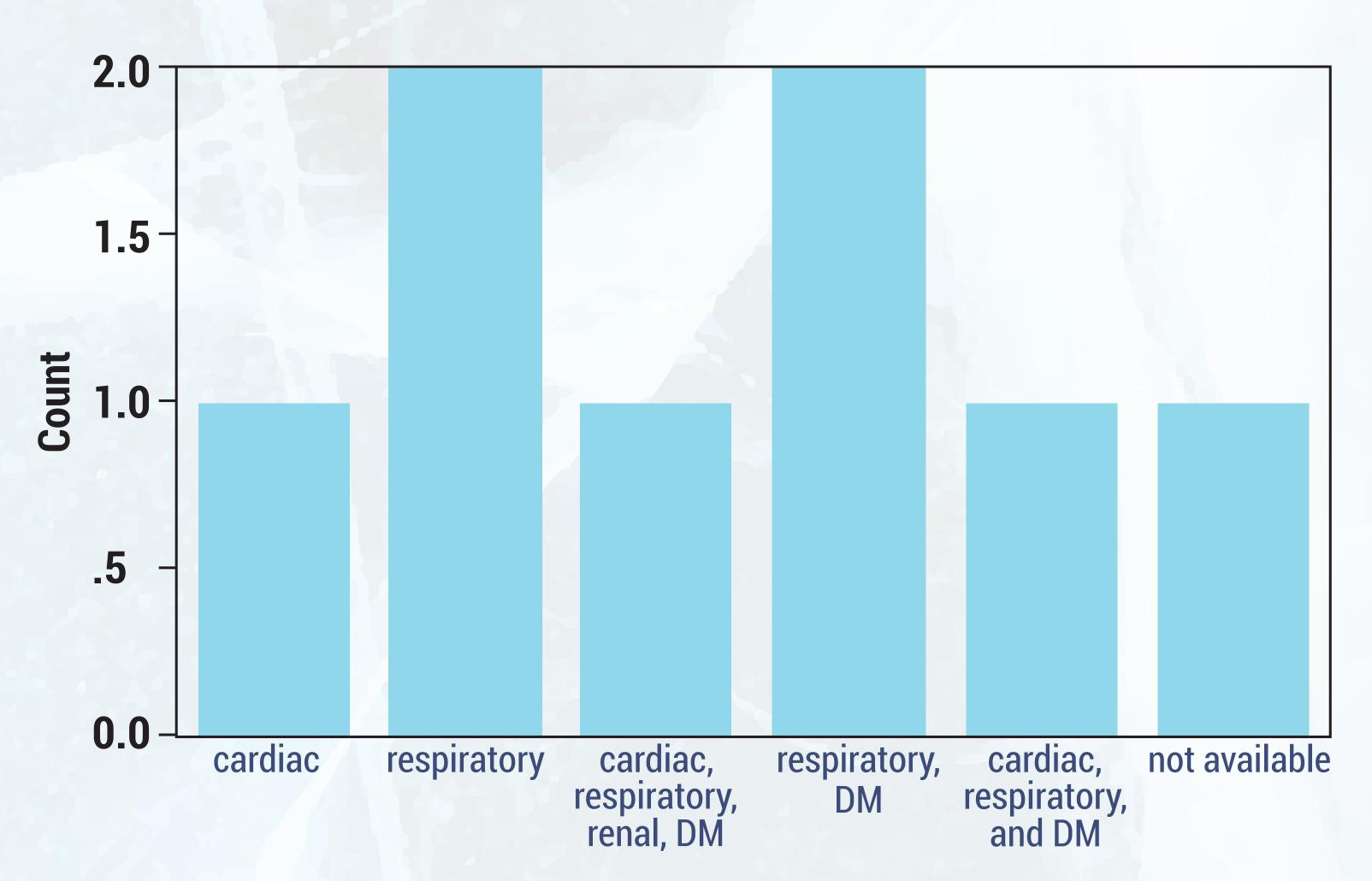


Results

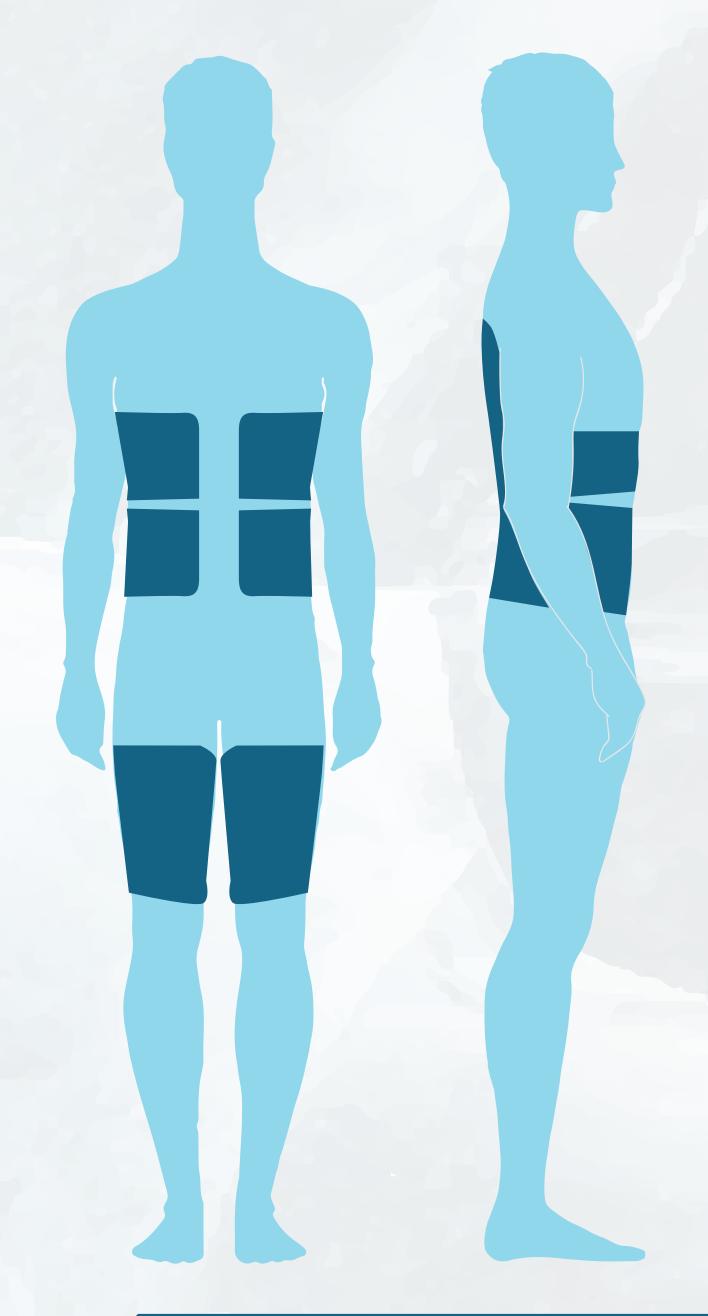
There were a total of 8 patients:

	N = 8	Female	Male	Mean Age	Community	Hospital
Pre-Intervention	3	33%	66%	56.6	33%	66%
Post-Intervention	5	40%	60%	54.9	40%	60%

- Generalized Co-morbidities:
 - Respiratory, DM, Renal, Cardiac



Cardiac, DM, Renal, Repiratory



Theropeutic Hypothermia Treatment

Post-intervention

62% increased utilization of the TH protocol 75% of the patients died, while 25% survived

Since this intervention there were 17, TH cases for the year 2014 and since March of 2015 there have been 7 cases.

Future

Present findings to Steering, Stakeholder and Critical Care Committees at Hospital

Meet with hospital administration to continue monitoring TH patients and decrease the number of outcome variables to collect.

Meet with local EMS, EMS Medical Director and ED to assist with implementation of TH in the field.

Theropeutic Hypothermia Treatment