Title: Using Evidence-Based Practice to Prevent the Incidence of Deep Vein Thrombosis in Postoperative Patients

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Abstract

Deep vein thrombosis (DVT) is a medical condition that can lead to thrombi in the veins, or blood clots. It is very common in post-operative patients and close to 1 million Americans are affected by this condition annually. Symptoms include swelling, pain, and redness in the affected area, primarily of the legs. If dislodged a thrombus can develop into an embolus, which can travel through the bloodstream to the lungs or brain and potentially cause death. In effort to bridge theory and practice, nursing research has led to evidence-based practice interventions and guidelines to prevent DVTs. Evidence-based practice in nursing involves using a problem solving approach to clinically make a decision that includes the best and latest evidence within the context of caring for the patient holistically. The Agency for Healthcare Research and Quality has a National guideline clearinghouse available for the nurses and healthcare professionals to access evidence-based clinical practice guidelines. The purpose of this project is to present evidence based practices that are being used by nurses to prevent DVTs in the postoperative setting. This project will be in a form of case study displaying the use of interventions (i.e., anti-embolism compression stockings and sequential compression devices) in an effort to prevent DVTs. Postoperative patients are to be monitored closely by nurses. Improper implementation of evidence-based practice guidelines has the potential to lead to negative patient outcomes. For example, improperly fitting of a patient for anti-embolism stockings can lead to poor blood circulation and enhance the risk of developing a DVT. Ultimately, nurses who properly follow evidence-based guidelines minimize the postoperative patients’ risks of developing DVTs and shorten their postoperative experience. Thus, the implementation of evidence-based practice improves patient outcomes and decreases health care costs.

keywords: deep vein thrombosis, anti embolism, postoperative, evidence-based practice