

Reducing Complications Related to IV Fluid Administration in the Hospital Setting



Improving Healthcare with Evidence Based Care
College of Nursing
Seton Hall University



PURPOSE

The purpose of this quality initiative is to bridge the gap between evidence and practice related to the management of intravenous (IV) fluids. With 90% of patients receiving IV fluids during the course of their hospital stay, increased awareness could have a substantial impact.

BACKGROUND

Recent studies indicate a higher complication rate than previously believed related to IV therapy. Adverse effects impact recovery time, length of stay, cost, patient safety and survival. Related complications are largely preventable and unmet educational needs are prevalent.

METHODS

Education has traditionally focused on benefits of IV therapy with minimal emphasis on potential harm. According to research, cautious practice yields improved patient outcomes. Changing deep-seated beliefs in healthcare presents a challenge. Educating student nurses prior to entry into practice will facilitate safer

POTENTIAL ADVERSE EFFECTS/COMPLICATIONS

- Pulmonary Edema
- Impaired wound healing
- Gastrointestinal Problems
- Worsening renal function
- Mild cerebral edema → *risk for falls
- Hyponatremia → *risk for falls
- Worsening anemia
- Acid-base imbalances

THEORETICAL FRAMEWORKS

- Donabedian's Quality Framework
- RWJF Transforming Care at the Bedside Initiative

IMPLICATIONS FOR PRACTICE

The disparity between evidence and practice regarding the management of IV fluids in the hospital setting must be further addressed to reduce the associated complication rate. Dissemination of best evidence is necessary to promote a change in practice patterns.

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