

CRRT Super Users To The Rescue

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Abstract

Nurses working at a national comprehensive cancer center were noticeably stressed and anxious when assigned to care for patients receiving CRRT. Nurses who did not have an opportunity to work on a regular basis with patients receiving CRRT were faced with a daunting task. They felt that too much nursing time was devoted to caring for “the machine” which added the burden of managing multiple liters of fluid volumes each hour monitoring an extracorporeal circuit in addition to caring for a critically ill patient. They were frustrated that “the machine” was always alarming and were uncomfortable trying to troubleshoot.

Objectives

To increase the comfort level of nurses caring for patients receiving CRRT in the Intensive Care Unit.

Methods

Volunteers were chosen to serve as leaders (*super users*) for the project.

3 nurses were chosen from the day shift and 3 nurses from the night shift. There was a balance of both novice and experienced critical care nurses.

The identified *super users* worked on the project with the CRRT machine for 2 months. With the dialysis nurse as part of the workgroup effort, they revised policies and created teaching materials that included a CRRT power point and reference flow chart. The group posted colorful visual aids in the unit including troubleshooting tips for CRRT, and obtained other educational assistance from the CRRT provider. A CRRT binder was developed which hosted evidence based practice articles related to CRRT for reference as needed. Competency forms were developed for new nurses in addition to an ongoing competency assessment form.

Results

The ***super users*** became proficient and knowledgeable with CRRT and shared their experience with other ICU nurses.

The training sessions were well received by all nurses in the critical care unit.

The dialysis nurse and CRRT ***super users*** are readily available to assist with the set up and troubleshooting of “the machine” as needed.

There is a noticeable difference with the reduction in anxiety and discomfort of the ICU nurses assigned to patients receiving CRRT.

Nurses are not as reluctant to care for these patients. Some have frequently requested an assignment **with** a patient receiving CRRT as they become more comfortable and proficient.

Conclusions

Since the start of super users there is a decrease with the complaint of problems with “the machine”.

As a result “the machine” is now a more welcome presence in the ICU for nurses caring for patients with Acute Renal Failure who are benefiting greatly from CRRT.