

Reducing Postoperative Neonatal Hypothermia at a High-Volume Quaternary Children's Hospital

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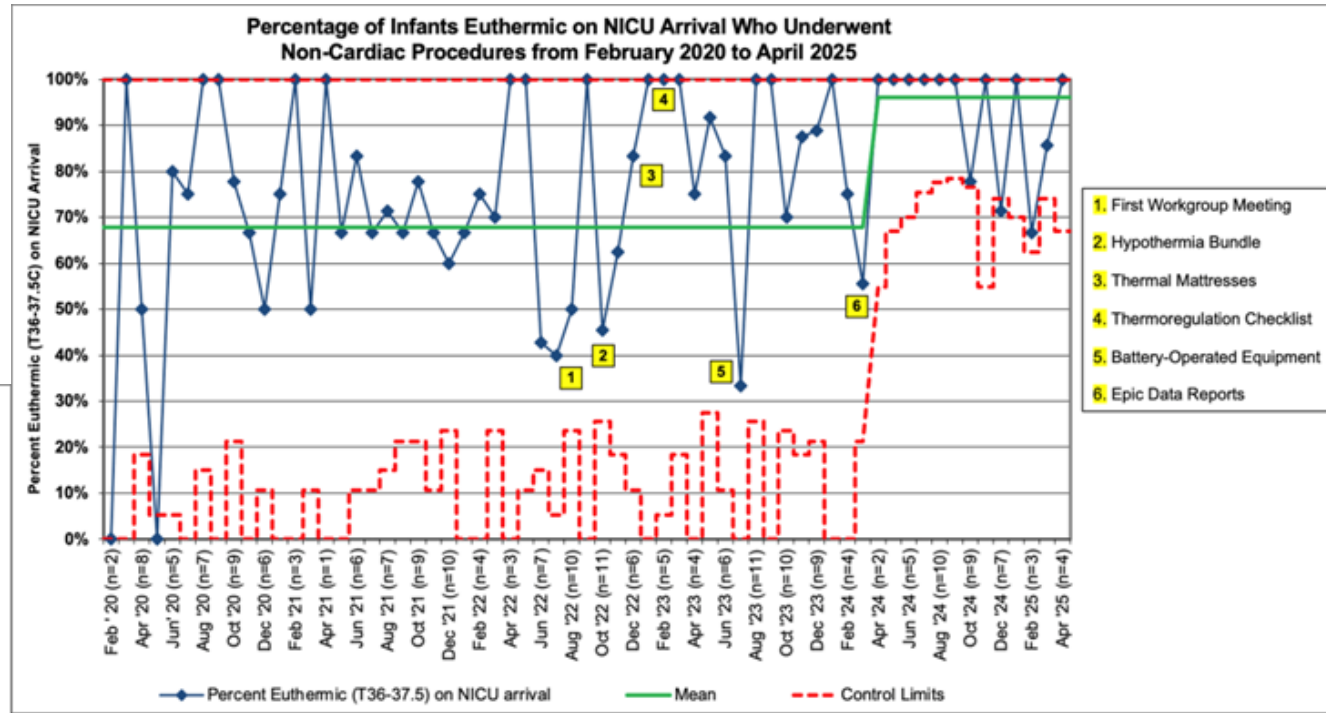
BACKGROUND: Postoperative neonatal hypothermia is a benchmark for the quality of care provided to neonates with the goal of achieving < 36 ° Celsius (C) (<96.8 ° Fahrenheit(F)) within 30 minutes of return to the Neonatal Intensive Care Unit (NICU) after a procedure.

POPULATION & SETTING: All infants admitted to a Level IV NICU who underwent non-cardiac surgical procedures

PRIMARY OUTCOME : The percentage of euthermic infants (temp of 36.0 to 37.5°C) within 30 minutes of return to the NICU after a non-cardiac surgical procedure

BALANCING MEASURE: The number of cases of post-operative hyperthermia defined as a temperature of greater than or equal to 37.6°C

RESULTS:



CONCLUSION: Since implementation of the post-operative neonatal hypothermia workgroup interventions and the work surrounding standardization, documentation, IT advancements and equipment, we were able to significantly improve maintaining euthermia and postoperative temperatures <36 ° within 30 minutes of return for all neonatal patients returning from a procedural area from a baseline of 67.9% to 96.1%. There were 5 cases (2.9%) of inadvertent post-operative hyperthermia, all of which were clinically insignificant. The workgroup is developing hyperthermia reduction guidelines when using the bundle.

NEXT STEPS:

- Standardize documentation of hypothermia bundle use to capture accurate process measures
- Apply these findings to infants undergoing other procedures including cardiac catheterization and cardiothoracic surgery

