مستشفى الرميلة
Rumailah Hospital

عضو في مؤسسة حمد الطبية
A Member of Hamad Medical Corporation

Institute for Healthcare Improvement

PRESERVE LIFE

PREVENT ASPIRATION PNEUMONIA

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Rumailah Hospital

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العناية المثلى دائما
Best Care Always
مبادرة من مؤسسة حمد الطبية
An initiative by HMC
حمد Hamad

AIM

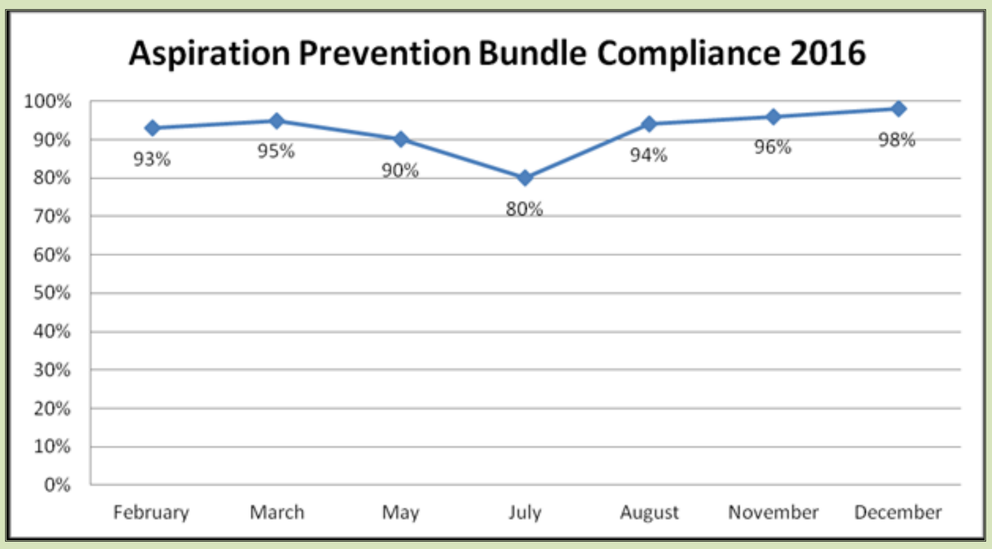
- To maintain 100% compliance in Aspiration Prevention Bundle by December 2017.
- To achieve Zero Aspiration Pneumonia by December 2017.

BACKGROUND

Aspiration Pneumonia is an inflammation (usually due to an infection) of the lungs and bronchial tubes that occur after inhalation of foreign matter. This condition is caused by inhaling materials such as vomitus, food, or liquid. This then leads to a bacterial infection. Aspiration pneumonia is a very serious medical condition, but it's treatable.

Oropharyngeal bacteria, illness, trauma, and tube feeding are priority conditions that set the stage for pneumonia. In long-term care, preventing aspiration pneumonia requires a multidisciplinary approach.

Aspiration is one of the most common complications in enteral fed patients. Aspiration is the inhalation of oropharyngeal or gastric contents into the larynx and lower respiratory tract. Patients are monitored for tolerance to enteral feedings by noting abdominal distension, complaints of abdominal pain, observing for passage of flatus and stool, and monitoring gastric residual volumes.

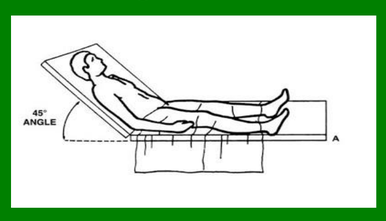


RESULTS

- Team work and evidence based practice improved patient's outcome
- Consistency with best practices contributed to the ongoing success
- Reduced morbidity and mortality
- Zero aspiration pneumonia since December 2014.

IMPLEMENTATION

- Introduced and implemented Aspiration Prevention Bundle for patients with NGT. Provided education and demonstration to all staffs about the bundle care.
- **Aspiration Prevention Bundle includes:**

1. Pre –feeding Assessment 	**Ensuring the placement and patency of the tube by checking the gastric PH level and residual volume.**
2. Positioning 	**Patient is placed on moderate high back rest (30 to 45 degree angle) during feeding and medication administration. To maintain on moderate high back rest for 1 hour after feeding.**
3. Post feeding assessment	**Assessing patient 's tolerance and checking for any signs of aspiration**
4. Oral Hygiene	**Using of Chlorhexidine mouth wash twice daily.**
5. Suctioning	**Stop feeding during suctioning.**

- Started to monitor bundle compliance rate and display the data of aspiration bundle on the Best Care Always board for staff motivation.
- Formulated a small group with one Champion to monitor and evaluate the process measures.
- Conduct dental check up every six months by Dentist.
- Yearly competency validation of NGT insertion, feeding, suctioning and care of patients with NGT.

CONCLUSION

- The program offered early identification of high risk patients by skilled multidisciplinary team.
- The result determines the improvement of patient outcome and prevents complication.

PLAN

- To adhere with the compliance rate by monthly monitoring any incidence of aspiration.
- Referral of long term patients for change of tube to PEG to improve personal image of the client.
- Early referral to speech therapy for weaning of the NGT tube
- Sustain the improvements gained by reinforcing the best practice.

LESSON LEARNED

Adhere and daily practice the documentation of Aspiration Bundle that will help us identify or detect early signs aspiration complications.