Importance of Accurate Intake and Output Charting Including IV Fluids and Medication Drips

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Title: Importance of accurate intake and output charting including IV fluids and medication drips.

Background of practice/clinical problem: Documenting fluid intake and output is a critical part of patient care, and gaps in a patient's chart can cause harm. Two factors that researchers believe to be the main problem behind inaccurate fluid documentation stem from the lack of awareness of the importance of fluid monitoring and the use of excessive and unnecessary monitoring (Vincent et al., 2015). Lack of awareness, as Vincent discovered, is found primarily in the medical assistant staff who carry out most work with fluids from little education about the importance of charting fluid. It has been reported that many healthcare workers have expressed dissatisfaction with the accuracy of patient's chart. Evidence-based measures need to be implemented to improve the accuracy of documenting patient's fluid intake (Liaw et al., 2018). Research has shown that the act of manually entering fluid measurements with a nurse's workload can cause this task to be overlooked (Kushnir et al., 2020). This makes treating patients more difficult in an acute care setting when orders placed are a direct result of certain lab values. Researchers have been trying to find a solution to remind and encourage health care workers to be charting their fluid measurements the moment it is collected.

Project aim: The aim of this project is to emphasize the importance of accurate intake and output charting including IV fluids and medication drips.

Method: The educational proposal design was created from the synthesis of multiple research studies to determine the most appropriate strategies to emphasize the importance of charting accurate intake and output including IV fluids and medication drips.

Finding/conclusions/implications for practice: While utilizing a UOP (automated urine output device), timeliness of documentation improved without compromising accuracy (Kushnir et al.,

2020). This reduced the workload and fatigue for nurses, which was identified to be a reason for incomplete intake and output documentation. This could break barriers such as time constraints, poor handovers, and patient compliance (Thompson et al., 2020). Addressing these barriers is extremely important and should be a priority because patient outcomes can improve when their fluids are closely monitored, especially if they are fluid restricted patients. Availability of a UOP device for patients needing strict urine output documentation should be explored. Through education, promotion of best practice, and varying audits on cardiac patients specifically, 100% of staff became compliant and 75% of patients became involved (Yang et al., 2019). This had a positive impact on clinical practice, including documentation and increased awareness of fluid record needs.

Implementation plan: This project will be implemented throughout R7 at MMC. We will educate the staff using informational pamphlets on how inaccurate intake and output charting can have effect on a patient's plan of care and identify the barriers to accurate charting of intake and output.

Method of evaluating outcome: To evaluate the effectiveness of our implementation plan, an electronic survey will be done prior to and following the distribution of educational materials that promote the importance of accurate charting of intake and output. The survey will evaluate whether our interventions to help this issue have had an impact on the healthcare staff working to resolve it.

References

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