

Preoperative fasting among burns patients in an acute care setting: a best practice implementation project

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Major burn patients commonly require multiple surgical procedures that require preoperative fasting. The American and European Societies of Anaesthesiologists recommend fasting from clear fluids for 2 hours and solids for 6-8 hours preoperatively. However, at the Royal Adelaide Hospital patients often fast from midnight preceding the day of surgery. This project aims to promote evidence-based practice to minimise extended preoperative fasting.

Methods:

A baseline audit was conducted measuring compliance with audit criteria, specifically on preoperative fasting documentation and appropriate fasting instructions in line with evidence-based guidelines. Strategies were implemented to address areas of non-compliance; including staff education, use of fasting documentation tools and completion of a perioperative feeding protocol. A post implementation audit assessed the extent of change compared with the baseline audit results.

Results:

Education on evidence-based fasting guidelines was delivered to 54% of staff. This resulted in a 19% improvement in compliance with fasting documentation and a 52% increase in adherence to appropriate evidence-based instructions. There was a shift from the most common fasting instruction being “fast from midnight” to “fast from 03:00 hours”, with overall a 4 hour reduction in fasting per theatre admission.

Conclusions:

Results highlighted that education improves compliance with documentation and preoperative fasting that are more reflective of evidence-based practice. Collaboration with key stakeholders, ongoing staff education and a hospital wide fasting protocol are warranted to sustain change and further advance evidence-based practice at an organisational level.

Key Words

Preoperative fasting, burns, evidence-based implementation project