

## **45th Biennial Convention (16-20 November 2019)**

### **Measuring the Prevalence of Delirium in Hospitalized Patients**

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#### **Purpose**

The purpose of this study was to determine point prevalence of delirium in patients in medical-surgical, step-down, and critical care units in six acute care hospitals. The results of this study will be used to guide further nursing interventions to prevent and reduce duration of delirium.

#### **Background/Significance**

Delirium has been identified as one of the most common complications experienced by older adults in the hospital setting, ranging in prevalence from 20%- 50% in medical-surgical units and as high as 70%-80% in mechanically ventilated patients in critical care units. Despite ongoing research, delirium remains under-recognized by all healthcare providers. Failure to recognize and manage delirium can result in detrimental outcomes for the patient, care providers, and the healthcare system. This issue was discussed with academia and practice members of the local nursing research consortium. The decision was made to develop a collaborative nursing research study, using a multi-institutional approach. Collective clinical nurse training and use of a common delirium screening tool assisted with establishing regional point prevalence of delirium.

#### **Methods**

A point prevalence design was used to identify delirium in eligible patients across 37 selected units in six participating hospitals. The design was modeled after the National Database of Nursing Quality Indicators point prevalence survey for pressure injury. In February 2017, delirium was assessed by clinical nurses using the CAM-ICU in the critical care units and the bCAM in the medical-surgical units and step-down units. Positive delirium screens for the total population were used to calculate percent prevalence by unit type. Additional data were collected through patient interview and medical record review regarding risk factors for delirium.

Regression analysis was used to identify clinical factors that contribute to delirium.

#### **Results**

Of 782 eligible patients, 108 patients met exclusion criteria, 30 patients refused to participate, and 14 patients had incomplete data collection forms resulting in a sample size of 630 patients. Positive screens were found in 62 patients for a prevalence of 9.84%. In the medical-surgical units, patients who had no documentation of ambulation were 7.9 times more likely to have delirium (p 0.000). Age and lack of ambulation were key factors predicting positive delirium screens in medical-surgical units. Although not statistically significant, critical care patients were three times more likely to experience delirium with the presence of urinary catheters and assisted ventilation.

## Conclusions and Implications for Practice

Through collaboration among six hospitals, the aggregated data of this study found 1 in 10 hospitalized patients experience delirium. Nurses can prevent, identify, and manage delirium through routine screening and nursing interventions. Lack of ambulation had the greatest impact on delirium, supporting mobility programs in hospital settings.

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### **Title:**

Measuring the Prevalence of Delirium in Hospitalized Patients

### **Keywords:**

Collaborative, delirium and prevalence study

### **References:**

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### **Abstract Summary:**

A point prevalence study for delirium was conducted in six acute care hospitals. Additional data was collected to identify clinical factors that contribute to delirium. This presentation will discuss a collaborative approach to multi-institutional research and review the results of this study.

### **Content Outline:**

- I. Introduction
- a. regional research consortium support for multi-institutional research
- II. Definition of Delirium
- III. Background and Significance
  - a. prevalence
  - b. impact on patient
  - c. impact on nurse
- IV. Purpose of study
- V. Methods
- VI. Setting
- VII. Sample
  - a. inclusion criteria
  - b. exclusion criteria
- VIII. Data collection
- IX. Findings/ Outcomes

### First Primary Presenting Author

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Nurse Specialist with over 14 years of experience in Medical Surgical Nursing. She is employed at St. Vincent in Evansville, IN. She has provided extensive education on delirium and implemented delirium screening outside of the ICU at St. Vincent. Kim was the Principal Investigator for this collaborative delirium prevalence study.

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