Effects of Early Ambulation in Prevention and Treatment of VTE

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Effects of Early Ambulation in Prevention and Treatment of VTE
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Background & Significance
Clinical problem is a discrepancy in the methods of prevention and treatment of VTE
VTE (venous thromboembolism) is a first event in approximately 100 out of 100,000 people
VTE is the synthesis of DVT (deep vein thrombosis) which can ultimately lead to pulmonary embolism
DVT occurs when a clot forms in the peripheral veins, possibly dislodging and journeying to the lungs
PE (pulmonary embolism) is a blockage in an artery of the lungs and causes permanent tissue damage
One in 5 individuals with PE die almost immediately and a further 40% die within three months
PE can develop 3-7 days after diagnosis of deep vein thrombosis
A thrombus may possibly detach due to muscle contraction
Patients often die within one hour after symptoms appear
Traditionally, health care providers recommend bedrest
Prolonged bedridden time increases the risk of PE

Interview with Nurse Mike
- A special thank-you to Nurse Mike and Nurse Corine for their assistance in learning hospital policy.

REGISTERED NURSE INTERVIEW

• Ambulate patient if medically able to get out of bed
• Consider patient, disease process, and personal ability

Grandview Hospital Policy for Early Ambulation
- Lippincott Williams & Wilkins journal article used for policy
- Provided by Nurse Corine
- Progressive ambulation used to improve the patient’s self-image and confidence
- Progressive ambulation used to prevent complications resulting from long periods of inactivity

METHODS

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<th>Strategy</th>
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EVIDENCE-BASED PRACTICE QUESTION

Question: What does current research deems to be the evidence based practice concerning the use of bed rest compared with early ambulation when either method is combined with thrombolytic therapy in the prevention and treatment of VTE?
P - At-risk hospital patients over the age of 18
I - Ambulation
C - Bedrest
O - Efficacy of preventing the progression of a DVT, of developing a new PE, or of death from any component of VTE

SYNTHESIS OF EVIDENCE

Organization
- Data organized according to:
  - Authors/year of publication
  - Purpose
  - Sample
  - Measurement of results
  - Results
  - Findings
  - Level of evidence

The evidence was then used as a guide to understanding the research, formulating a conclusion, and synthesizing the findings into an integrated review

EVIDENCE-BASED PRACTICE RECOMMENDATIONS

Conclusions from Research
- Ambulation does not increase the risk of VTE
- Important to encourage early ambulation
- Early ambulation is key to progressing toward a more independent and healthier individual

Application in Grandview Hospital
- Nursing staff should continue the practice of early ambulation in the prevention and treatment of VTE

LIMITATIONS

- Small number of participants in some studies
- Inability to isolate just bedrest or just ambulation in experimentation
- Use of sources >5 years old since publishing date of some articles used as references

REFERENCES


ACKNOWLEDGEMENTS

A special thank-you to Nurse Mike and Nurse Corine for their assistance in learning hospital policy.