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Alarm Fatigue

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Alarm Fatigue
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PATIENT CARE ISSUE

- The phenomena of repeated false alarms over time causes nursing staff to become desensitized, responding less frequently and less punctually resulting in compromised patient care and safety. 
- Characterized and caused by false positive and clinically insignificant alarms
  - Referred to as the “crying wolf” effect
- The Joint Commission (TJC) estimates 85-99% of alarms are insignificant
  - Reinforced by Graham, who estimated <1% of alarms resulted in nursing intervention
- In 2013, TJC issued a Sentinel Event raising awareness about alarm fatigue, requiring hospitals to create guidelines for medical equipment alarms
  - The new policies need revision and further study before a definitive answer can be recommended to reduce noise and increase nursing efficiency
- Florence Nightingale in Nursing: What It Is, and What It Is Not: “Unnecessary noise, then, is the most cruel absence of care which can be inflicted either on sick or well”

REGISTERED NURSE INTERVIEW

- Healthcare team interviewed: RN and RN team leader of Cardiac floor and RN on Pulmonary Advanced Care Unit of local magnet hospital
- Awareness of issue: RNs were aware of the issue and daily experience the effects of alarms
  - Knowledge of current policy: limited knowledge of hospital policy, no knowledge of EBP
  - Effect on Nursing: decreased sense of teamwork, increased frustration, heavy reliance on clinical judgment as opposed to monitors and responding to every alarm
  - Positive influences: team meeting awareness, soundproofing materials on walls, individual patient rooms, numerous hall monitors, and quick alarm response times

EVIDENCE-BASED PRACTICE QUESTION

**Question:** For hospital nurses, do structural system changes as compared to individualized monitoring decrease alarm fatigue and increase patient safety?

P = Hospital nurses
C = Structural changes
O = Alarm fatigue & Pt safety

METHODS

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REFERENCES