

Evaluating A Skin Antisepsis Protocol To Decrease Cesarean Surgical Site Infections In Women With Increased BMIs

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Cathleen Dillen DNP, RN, AOCNS, ACNS-BC
Lori A. Smith MSN, RN-BC

Clinical Significance

- ❖ Over 1.3 million annual cesarean deliveries (Martin et al., 2016)
- ❖ Maternal obesity and CD rates high (CDC, 2016; Ngai et al., 2012)
- Complications of CDs increase as BMI increases
- Surgical Site Infections (SSIs) common complication
- ❖ BMI an independent risk factor
- Skin antisepsis prevents SSIs.
- Study hospital experienced a significant increase in CD SSI rates



Literature Search

Literature Themes included:

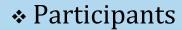
- SSI relationship to CD
- Independent risk factors of CD SSI
- * Correlation between elevated BMIs and CD SSIs
- Skin Antisepsis to prevent CD SSIs
- Skin Antisepsis Guidelines



Project Methodology

- Quantitative Quality Improvement Design
- ❖ Retrospective Electronic Health Record Reviews
 - Pre and Post Protocol Implementation
- Semirural community hospital in Central

Pennsylvania



- Inclusion Criteria
- * Exclusion Criteria





Patient Demographics

Variable	Historical <i>n</i> = 17	Intervention $n = 12$
Maternal age (years)	26.8 ± 4.0	28.5 ± 4.0
Infant gestational age (weeks)	39.1 ± 0.7	39.4 ± 0.5
Maternal weight (pounds)	244.8 ± 47.5	249.2 ± 28.5
BMI (body mass index)	43.6 ± 5.4	42.7 ± 5.8
Estimated blood loss (ml)	535.3 ± 39.6	366.7 ± 165.0
Length of surgery (minutes)	67.9 ± 23.4	87.1 ± 12.7

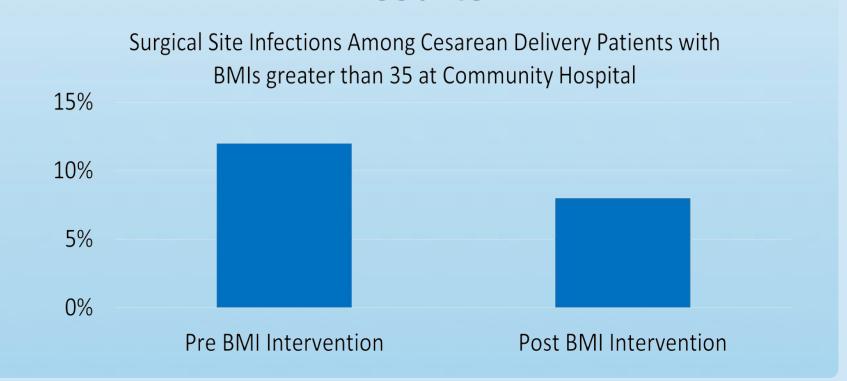


Statistical Significance of SSI Rates

Difference	0.034
z (observed value)	0.000
z (critical value)	1.960
<i>p</i> -value (two-tailed)	1.000
α alpha	0.05



Results





Conclusions and Implications

- QI project indicated clinical significance
- Both cohort groups demographically comparable with no independent variables predicting SSI
- Indicates feasibility and safety of continuing project





References

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