Delirium Screening: From Research to Point of Care
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BACKGROUND & SIGNIFICANCE
Postoperative Delirium Among Older Adults is Significant and Under-Recognized.

Postoperative delirium is a common and often overlooked complication of surgery, particularly in older adults. Delirium can significantly impact patient safety and recovery, leading to increased morbidity, mortality, and healthcare costs. Older adults are more susceptible to developing delirium due to age-related cognitive changes and comorbidities. Despite its prevalence, delirium is often underdiagnosed and undermanaged, leading to suboptimal patient outcomes. Early recognition and appropriate management are critical for improving patient safety and decreasing postoperative complications.

PHASE I: FOCUS GROUPS

Sampling and Design
This phase of the project involved focus groups with bedside nurses and nurses' academic advisors to identify barriers to delirium screening and management. A total of 12 focus groups were conducted, with 9 focus groups involving bedside nurses and 3 focus groups involving nurses' academic advisors. The focus groups were audio-recorded and transcribed for analysis.

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Metering of the system was tracked and summarized. These activities were completed during phase I.

Phase II: Pre-Intervention Phase

Aim 3: To determine the effect of using the Confusion Assessment Method-4 Test (CAM-4) on the management of delirium and the implementation of the new process.

Aim 4: To determine the effect of using the Confusion Assessment Method on clinicians' recognition of delirium and the implementation of the new process.

PHASE I: FOCUS GROUPS

In the literature, the prevalence of delirium among older patients undergoing hip fracture surgery is reported to range from 27% to 54%. Delirium is an important component of patient safety and quality health services for these patients. Successful treatment of delirium is associated with improved patient outcomes, including reduced hospital length of stay and mortality.

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INTRODUCTION

Delirium is a common complication of surgery, particularly in older adults undergoing hip and knee replacement surgery. The American Geriatrics Society and the American College of Physicians have recommended delirium screening for older patients in the hospital setting to improve patient safety and outcomes. However, delirium screening is not consistently performed in clinical practice.

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REFERENCES: