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Successful Implementation of the ABCDEF Bundle in the MICU through Interprofessional Collaboration and Teamwork

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Earlier this year, members of the medical intensive care unit (MICU) attended an interprofessional workshop that utilized Awakening/Breathing/Choice of Sedation/Delirium/Early Mobility (ABCDE) bundle simulation combined with TeamSTEPPS training to empower care givers to advocate for patient safety while optimizing patient care. The ABCDE bundle is an evidence-based tool designed to implement pain, agitation, and delirium guideline recommendations into routine practice. To further improve patient safety and outcomes and build upon the ABCDE concept, the MICU team developed an interprofessional practice project by adding routine assessment of need for indwelling Foley catheters to their daily work list, creating the "ABCDEF" bundle.

The first Monday following the interprofessional workshop, the Clinical Nurse Specialist, Nurse Manager, and Respiratory Therapy Supervisor began focused rounds on ABCDEF components for all intubated patients in the MICU. The Bedside Nurse and Respiratory Therapist (RT) were sought out to briefly discuss how the ABCDEF bundle applied to their patient. A physician was often present. If the patient met criteria for a spontaneous breathing trial (SBT), the RT made the changes immediately. After a few months, a physical therapist joined ABCDEF rounds, a physician was always present, and the review was expanded to all MICU patients. As a result of coordinated ABCDEF rounds, Physical and Occupational Therapy are now able to obtain orders for mobility early in the morning, request adequate staff to mobilize patients, and create a schedule around planned procedures. With interprofessional collaboration, a script was created for ABCDEF rounds and team members now include the bedside nurse, respiratory therapist, physical or occupational therapist, and a physician who enters orders as needed and confirms that all team members are heard before moving on to the next patient. In addition to ABCDEF components, quality measures such as the continued need for central venous access, nutritional status, and presence of wounds are also addressed. Use of the script ensures that these structured rounds take less than three minutes per patient.

In addition to the ABCDEF rounds, education about the bundle takes place in other venues. The pharmacist leads the interprofessional sedation committee, participates in the development of health system-wide policies and procedures reflecting best evidence-based practice, and provides interprofessional education to nurses, physicians, and respiratory therapists regarding ABCDEF bundle components, pain and sedation algorithms, medication selection, and neuromuscular blockade. Nurse educators provide training to the nursing staff regarding delirium assessment, utilizing CAM-ICU scores, and documenting assessments accurately.

The MICU ABCDEF rounds bring together the interprofessional team to set the patient's plan in motion first thing in the morning. The team's listening skills have improved, and they are able to reflect on how the work of other members impacts the patient. Since the implementation of daily ABCDEF rounding, the MICU's unit acquired pressure ulcer rate has decreased slightly, catheter associated urinary tract infections and central line associated blood stream infections are being maintained at levels below goal, device utilization rates are decreasing, and the average ventilator days are hovering around the lower limit.