

Title: Time is Survival: Continuing Education on Sepsis for Neurosurgical Critical Care Nurses

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Background Early identification of sepsis in neurosurgical critical care patients is a significant challenge due to the many possible confounding variables that lead to altered mental status in this specific patient population. Nurses' knowledge, attitudes, confidence, and practices related to the early identification and management of sepsis are crucial to patients' survival. Continuing education for neurosurgical critical care nurses on the signs and symptoms of sepsis and the Surviving Sepsis Campaign guidelines is necessary and may improve patient outcomes.

Purpose The goal of this evidence-based intervention project was to implement continuing education to neurosurgical critical care nurses on the early signs and symptoms of sepsis and the management of sepsis and increase knowledge of the Surviving Sepsis Campaign (SSC) guidelines.

EB Intervention: This project evaluated neurosurgical critical care nurses' current knowledge, confidence, attitudes, and practices related to identifying and managing sepsis according to the SSC guidelines before and after an online sepsis education course.

Outcomes Nurses reported increased knowledge and confidence in identifying and managing sepsis and SSC guidelines after the education. Nurses reported an increased likelihood of routinely assessing patients for sepsis and discussing their risk each shift. What remained consistently low across all surveys was the practice among nurses of initiating the SSC guideline's 1-hour sepsis bundle.

Implications It is essential to broaden neurosurgical critical care nurses' knowledge and assessment skills to include screening for sepsis, as this is another crucial factor affecting mental status. Education will enhance confidence and help nurses feel empowered to advocate for the SSC's evidence-based interventions when sepsis is identified. A written sepsis protocol based on the SSC guidelines will also be needed in the future to authorize nurses to initiate appropriate sepsis interventions sooner and could potentially save lives.