Feature

Exploring Quality of Life in Critically Ill Tracheostomy Patients: A Pilot Study

Vinciya Pandian, PhD, RN, ACNP-BC; Sonali Bose, MD; Christina Miller, MD; Adam Schiavi, PhD, MD; David Feller-Kopman, MD; Nasir Bhatti, MD; Marek Mirski, MD, PhD

Background: Tracheostomies are performed to improve health-related quality of life (QOL) in patients requiring prolonged mechanical ventilation. As the lengths of stay in intensive care units (ICU) increase and higher rates of tracheostomies are becoming more prevalent, issues regarding patient perceptions of their own prognosis and outcomes after tracheostomy can considerably impact QOL and in turn their care and recovery. Whether tracheostomy improves QOL, however, has not been studied adequately. Current studies investigating QOL have been limited to pre- and post-ICU admission, have relied on surrogate measures such as clinical outcomes and proxy reports, and have used inadequate instruments, failing to capture all domains of QOL. Studies using a robust instrument to investigate QOL in the ICU before and after tracheostomy are lacking.

Clinical Consensus Statement: Tracheostomy Care-Putting Statements into Action!

Cindy Dawson, MSN, RN, CORLN
Michele Farrington, BSN, RN, CPHON

Heat and Moisture Exchange Devices for Patients Undergoing Total Laryngectomy

Pearl Icuspit, BSN, RN; Bharat Yarlagadda, MD; Shweta Garg, PA-C; Theresa Johnson, BSN, RN-BC; Daniel Deschler, MD, FACS

Departments

Guest Editorial

Guest Editor Thoughts: Take the Lead
Cindy Dawson, MSN, RN, CORLN

Poetry Corner

Shot Girls
Editor: Maggie Kramper, MSN, FNP, CORLN
Author: Dorothy Harsen, RN-BC, FNP

Highlights From The Hill

Why Is Government Relations Important To My Nursing Practice?
Sharon Jamison, BSN, RN, CORLN

Products Of Interest

Otologic Products
Editor & Author: Carolyn Waddington, MS, RN, FNP-C, CORLN

High Level Disinfection of Scopes: Solution Temperature Update
Cindy Dawson, MSN, RN, CORLN
Office Frenotomy for Neonates: Resolving Dysphagia, Parental Satisfaction and Cost-Effectiveness

 Objective: To determine parental satisfaction and cost-effectiveness of having a frenotomy performed in the office setting versus in the operating room under general anesthesia.

 Method: After obtaining IRB approval at The Children’s Hospital of Philadelphia (CHOP), we performed a retrospective chart review of patients having a frenotomy in the office between 2003-2008. 55 patients met the criteria and 25 were consented and their parents interviewed.

 Conclusion: All participants reported an improvement in feeding within one day and up to two weeks following the procedure. Parents also reported being somewhat satisfied to very satisfied with having the frenotomy performed in the office versus under general anesthesia. There were no complications reported. Performing the frenotomy in the office provided patients with satisfaction as well as cost savings. The surgical fee for a frenotomy in the office is $850 and is the same as if the procedure is performed in the operating room. Performing a frenotomy under general anesthesia includes extra cost which consists of an anesthesia fee of $500-$900 and hospital charges ranging from $500-$8,000. Performing the frenotomy in the office on our 25 patients has resulted in a cost savings of more than $240,000 and the avoidance of general anesthesia in the first few weeks of life. Office frenotomy should be considered in children with ankyloglossia who present with difficulty nursing in the first week of life.
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Feature

Research, Evidence-Based Practice and Clinical Improvement/Innovations Posters
During the SOHN 37th Annual Congress and Nursing Symposium in Vancouver, BC attendees had the opportunity to earn contact hours by reviewing and evaluating more than 18 outstanding posters. The top three posters in the Evidence-Based/Clinical Category were recognized with an award. An award for the First Place Research Poster was also given.

A Study of Nurse-Guided Distraction as a Method of Reducing Pain during Nasopharyngeal Endoscopy
*Henedia V. Sirilan, RN, MSN and Susan B. Fowler, PhD, RN, CNRN, FAHA*

Departments

*Guest Editorial*
Nurse in Washington Internship
*Maggie Chesnutt, MSN, FNP, BC, CORLN*

*Highlights From The Hill*
A Mid-Year Status Report on Issues of Interest to Nurses
*Ann P. Luther, APN, ACNS-BC, CORLN*

*Media Review*
Nurse Entrepreneurs: Tales of Nurses in Business
*Editor & Author: Laura Krioukov, BSN, RN*

*Products Of Interest*
Heat and Moisture Exchange Devices
*Editor & Author: Carolyn Waddington, MS, RN, FNP-C, CORLN*

*Poetry Corner*
Becky
*Editor: Maggie Kramper, MSN, FNP, CORLN*
*Author: Dr. Stanley Thawley*

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Feature

Understanding the Challenges During Transitions of Care for Children with Critical Airway Conditions

Nurses are in a unique position to improve both the quality and coordination of care to these children and their family members. An effort to improve transfer of care between institutions and nurses could reduce the combined length of stay for patients and reduce avoidable readmissions. Nurses are in a key position to enhance the competence, confidence, and comfort for family members and caretakers to exercise their postdischarge responsibilities.

Departments

Guest Editorial

“Innovation, Imagination and Inspiration: ORL Nursing”
SOHN 2014 Congress Opening Ceremony - Presidential Address
Maggie Chesnutt, MSN, FNP, BC, CORLN

Highlights From The Hill

The Government and Social Media: Game Changer or Same Old Story?
Sharon Jamison, BSN, RN, CORLN

Products Of Interest

Surgical Drains
Editor & Author: Carolyn Waddington, MS, RN, FNP-C, CORLN

Poetry Corner

I’m Not Ready
Editor: Maggie Kramper, MSN, FNP, CORLN
Author: Aubrey Atwater