The Development of Clinical Nursing Practice Guidelines for Preventing of Infection during Intubation in Patients with Suspected or Confirmed COVID-19

Authors: Sarinra Thongmee, Krittaporn Prakobsaeng, Adithep Mingsuan, Chanyapak Polkhet, Supattra Wongsuk Abstract: The purposes of this research and developmentwasto develop and evaluation of the clinical nursing practice quideline (CNPG) for the prevention infection during intubation in patient with suspected or confirmedCOVID-19 patient. This study was developed by using the evidencebased practice model of Soukup (2000) as conceptual framework. The study consisted of 4 steps: 1) situational analysis of intubation service in patients with confirmed COVID-19; 2) development of the CNPG; 3) apply the NPG to trial; and 4) evaluation of the CNPG. The sample consisted of 52 nurse anesthetists and 25 infected or suspected COVID-19 patients. The research instrument consisted of 1) the CNPG, which was developed by the researchers; 2) the nurses anesthetist opinion questionnaire to the guideline; 3) the evaluation practice form; and 4) the nurse anesthetist knowledge test on nursing care of patients infected with COVID-19. Data were analyzed by using descriptive statistics, and Wilcoxon matched-pairs signed rank test. The results revealed this developed CNPG consists of 4 sections: 1)the CNPG for airborne precautions2) the preparation of anesthetic and intubation equipments3) the roles and duties of the intubation team, 4) the guidelines for intubation in suspected or confirmed COVID-19 patients. The results of CNPG use found that 1)the provider: using NPG in providers revealed that nurse anesthetist had a higher mean of knowledge scores than before using CNPG statistically significant at the 0.05 level (p<0.01) and able to follow the NPG 100% inall activities. The anesthetic team was not infected with COVID-19 from intubation outside the operating room. 2)the client: the patient was safe, with no complications from intubation. Summary CNPG to prevent infection during reintubation of suspected or confirmedCOVID-19patient was appropriate and applicable to practice.

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