**Oral Defense Announcement**  
University of Missouri – St. Louis Graduate School

An oral examination in defense of the dissertation for the degree
Doctor of Nursing Practice with an emphasis in Acute Care Pediatric Nurse Practitioner

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B.S.N., Goldfarb School of Nursing at Barnes-Jewish College, St. Louis, MO, 2015  
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**Evaluation of a Process Change Using an Updated Sedation Protocol**

Date: July 6, 2022  
Time: 7:15 am to 7:50 am  
Place: 204 SCCB

**Abstract**

**Problem:** Pediatric delirium is continuing to increase intensive care environments and for patients who require mechanical ventilation and continuous sedative medications. Delirium is harmful to the patient creating lasting neurologic and mental health issues along with prolonged hospitalization and increased healthcare cost.

**Method:** For this quality improvement (QI) project, a descriptive observational study was used to evaluate the implementation of a sedation protocol for patients who are mechanically ventilated and on continuous sedative medications. This was completed with the use of retrospective chart reviews three months prior to implementation and three months after the new protocol was implemented. Nurses were given education prior to implementation and well versed on the protocol. This project evaluated patient’s Cornell Assessment of Pediatric Delirium (CAPD) scores, days of mechanical ventilation (MV), and length of stay (LOS) in the ICU.

**Results:** Sixty patients met eligibility criteria and participated in this project, thirty were before the implementation of protocol, Group A and thirty after Group B. After the implementation of the new sedation protocol the percent positive CAPD scores increased from 67% to 78%. The average LOS for Group B was 10.6 down from Group A at 10.9. The average days of MV decreased from seven in Group A to 6.4 in Group B.

**Implications for Practice:** After evaluating the implementation of new sedation protocol in a PICU, the CAPD scores did not decrease but the LOS and MV did. Due to many factors including developmental delay, CAPD scores are subjective and can range by scorer. More research must be necessary to evaluate if these changes are decreasing pediatric delirium.

**Defense of Dissertation Committee**

Chairperson Cathy Koetting, PhD, DNP, APRN, CPNP-PC, PMHS, FNP-C  
Committee Faculty Member, Elise Schaller, DNP, APRN, CPNP-PC  
Committee Member Lindsey Kerley, MSN, APRN, FNP-C, CPNP-AC