

## Care of the Adult Naso-Enteral Tube-Fed Patient: Evidence-Based Practice in Action

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**Problem:** Evidence-based standards of nursing practice rest on the premise that clinicians can explain interventions using research-based knowledge as well as expertise. But how do nurses translate current research and advanced perspective into established protocols and routines? Led by a group of clinical nurse specialists (CNSs) interested in supporting acute care staff nurses in the care of tube-fed patients, a multidisciplinary team embarked on a journey to incorporate research and expert opinion into clinical practice.

**Strategy:** Forming a working group with CNSs from a variety of clinical settings as well as a physical therapist, a medical librarian, a speech pathologist, and a nutritionist, we took a three-phase approach in our objectives:

Phase I – *completed*:

- a) Conduct a survey of clinical staff on current tube feeding practice.
- b) Review and evaluate current nursing and biomedical literature.
- c) Identify 6 topics with specific questions related to tube feeding.

Phase II – *ongoing*: Synthesize evidence from current literature and expertise.

Phase III – *by June 2007*: Formulate evidence-based tube feeding practice recommendations.

**Evidence:** Searched literature in MEDLINE and CINAHL for the years 1986-2007, mined citations from references, explored relevant associations' and governmental web sites, and contacted a nursing expert in the field. From more than 500 selected citations, created a recommended reading list of guidelines and journal articles. Appraised research by using levels of evidence table and reviewing consensus/expert opinion documents.

**Evaluation:** Completed survey of current practice with two independent convenience samples of hospital nursing staff (n=175 medical-surgical nurses and n=46 critical care nurses.)

**Results and Recommendations:** As a result of the analysis of nursing survey data and the literature review, we will recommend a series of practice changes for implementation on all acute care units. We believe this multidisciplinary and step-wise approach serves as a model for the adoption of evidence into other clinical practice areas.

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