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Evolution of the Specialized Nursing Staff on Sulpizio 4AB

By: Krista O'Brien BSN, RN and Meghan Jones MSN, RN, FNP-C

The University of California, San Diego (UCSD) identified a need to provide expert nursing and medical care for a unique group of patients. In response, the Sulpizio Cardiovascular Center (SCVC) was created to offer specialty care to those with cardiovascular and/or pulmonary diagnoses. This new center included an intensive care unit, a procedural area, and two progressive care units. One of those units, SCVC 4AB Progressive Care Unit (PCU), has evolved over time. As nurses on this unit, we would like to share the history of this evolution to a highly specialized unit with complex patients.

Initially, the Intermediate Unit (IMU) in Thornton Hospital provided care to all types of patients needing a higher level of attention than medical-surgical or telemetry level of care. This included patients with a diverse range of conditions: cystic fibrosis, cardiac problems, pulmonary issues, seizure disorders, as well as the geriatric or bariatric patient. Many nurses from the Thornton IMU transferred to help open the fourth floor PCU in Sulpizio in 2011. These RNs, and those subsequently hired, were able to hone their skills and knowledge to these specific patients and diseases. Since then, our unit has continued to flourish and we take pride in our distinctive and exceptional skill set.

Before the SCVC opened, all of the nurses hired to care for patients in the fourth floor PCU attended a program created by the American Association of Critical Care Nurses (AACN) called the Critical Care Internship Program (CCIP). This comprehensive curriculum extended over twelve days and focused on the physiology and pathophysiology of all of the major body systems. Recently the need for unit-specific education for our specific patient populations arose. The masters-prepared SCVC nurse educators created the Cardiac Boot Camp, a four-day series intended for Sulpizio RNs addressing topics relevant to the care of cardiovascular patient in a didactic in-classroom and hands-on setting.



Krista O'Brien, BSN, RN has been a cardiac nurse for three years. She started as a new grad RN at Sharp Healthcare and after obtaining her BSN in 2017 was thrilled to sign on with UC San Diego Health. Krista plays an active role in committees on her unit and plans to continue to grow in the cardiovascular field after obtaining her MSN and becoming a nurse practitioner.



Meghan Jones MSN, RN, FNP-C has been a nurse for 4 years. She began her career as a new grad RN at Sulpizio Cardiovascular Center, on the Progressive Care Unit. She recently completed her master's degree in nursing and is now a certified family nurse practitioner. She hopes to transition to a nurse practitioner position in cardiovascular care at UC San Diego Health soon.



ARTWORK BY:
Hannah Saarinen

Day One includes an in-depth review of hemodynamic monitoring, waveform interpretation and vasoactive drips. The overview of cardiac anatomy is accomplished via pig heart dissection.

Day Two focuses on postoperative implications for the cardiothoracic patient, oxygen delivery and ABG interpretation, as well as hands-on practice with Flolan, Remodulin and radial artery punctures.

Day Three provides a review of MI/STEMI care and advanced heart failure. A skills lab reviews arterial compression devices and pericardial drains.

The final day includes a focused examination of Ventricular Assist Devices (VADs). An additional skills lab emphasizes equipment troubleshooting of the HeartMate, HeartWare and Tandem VADs.

Upon completion of the series and associated competencies, nurses have expressed confidence in their ability to provide safe and competent care for the patients of these advanced specialties.

In 2017, the SCVC intensive care unit opened a second unit with twelve additional beds for a total of twenty-four beds. This increase in capacity helped alleviate the need for beds for the critically ill patient in the intensive care unit (ICU). However, the PCU patient is very high acuity requiring frequent surveillance and treatments delivered using technology that cannot be provided at a medical-surgical staffing ratio. This created an opportunity for SCVC PCU to develop into a 27-bed "hybrid" floor. Our patient population expanded to accept and care for ventilated patients and patients with Swan Ganz catheters. At this time, the patient population includes anyone pre- or post-operative cardiovascular or pulmonary disorder. The most common are the heart/lung transplant, pulmonary thromboendarterectomy (PTE), open-heart surgery, general vascular surgery, general surgery and patients with ventricular assist devices. In addition, stroke recovery patients and

those with medical conditions such as pulmonary hypertension are admitted to the SCVC PCU.

In order to provide this complex level of care, all nurses have developed knowledge and skills to monitor and care for these patients. Among the required skills are continuous telemetry (ECG) monitoring, hemodynamic monitoring (arterial blood pressure, central venous pressure and pulmonary artery pressure), ultrafiltration, ventilator support, ventricular assist devices (HeartMate and HeartWare) and Prostacyclin therapy.

The process of developing a staff of about seventy nurses to possess the didactic knowledge and clinical skills needed for this complicated population has required significant planning and collaboration. The management team and nurse educators met routinely with the staff to elicit concerns, identify potential problems, and propose solutions. The staff received didactic instruction followed by clinical preceptorships in the ICU. The most experienced staff were trained initially. They then assisted in the mentoring of the more neophyte group. As a result, the PCU staff has acquired a distinctive and exceptional skill set. At the same time, the staff continues to incorporate holistic treatments and education for the patient and their family to provide for the most comprehensive healing and supportive patient care.

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