PICOT Statement

NRS 490

Grand Canyon University

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**Introduction**

Formulation of a PICOT statement comes in handy when identifying the clinical problem in focus, that is, an increase in mortality rate among adults following cardiac arrest. This research into the intervention that can be applied and its effectiveness on acting on the clinical problem will come in handy once it has been compared with the hands plus breathing CPR, and its effectiveness in the same case. The PICOT statement plays an important role in clarifying the issue at hand, especially the medical issue in focus. The PICOT statement, in this case, covers an evidence-based solution, nursing intervention, patient care, health care agency, and nursing practice with regard to the hands-only CPR being provided to adults for the sake of attempting to reduce the mortality rate (Lynn, 2010). The PICOT statement effective in this case is:

P – Patient (adult)

I – Intervention (Hands-only CPR)

C – Comparison (hands-plus-breathing CPR)

O – Outcome (reduced mortality rate in adults)

T – Time required to realized outcome achievement

The clinical problem, in this case, is the issue of an increase in mortality rate. The mortality rate remains high, or increases due to the failure of the right first aid measures being applied, or failure of the right way of giving a patient CPR, or failure of knowing the measures to apply to a person who requires assistance with breathing. The outcome can turn from negative to positive in such a case when hands-only CPR is applied to a person who does not have the ability to breathe on their own. A person is then required to assist this patient when a medical responder is absent.

**Evidence-Based Solution**

The evidence-based solution in the event that an adult stops breathing is performing CPR (cardiopulmonary resuscitation) on them to help them breathe back to life. This is based on such a situation as a person suffering from cardiac arrest. The evidence-based solution carries the patient population in question (adults), as well as the intervention to be applied (hands-only CPR) (Field, A.C.E.P., & A.H.A., 2012).

**Nursing Intervention**

The most effective nursing intervention to be applied in the event of an adult’s lack of breath is the hands-only CPR. When an adult experiences cardiac arrest, a bystander may help them out by performing hands-only CPR. It is an effective method because it does not require training to perform, and it has been found to be successful in the application, as opposed to performing rescue breathing with chest compressions. Chest compressions may be interrupted by the rescue breathing when the person performing it is untrained.

**Patient Care**

Patient care can be provided, in the event of cardiac arrest, through performing hands-only CPR. Bystanders should also take it upon themselves to perform CPR, especially in the absence of a medical responder, and until the responder arrives to keep the person alive. Once the responder arrives, the bystander can now leave it to the trained professionals.

**Health Care Agency**

The healthcare agency in charge, after arrival at the scene, can aid in the performance of hands-only CPR while using a defibrillator, followed by taking the patient to the hospital once oxygenated-blood starts getting to the brain, and they start breathing again. The hospital can take a closer look at the issue with their health, and help the patient recover. Hands-only CPR cannot be used on a patient with a Do Not Resuscitate order from the doctor.

**Nursing Practice**

To perform hands-only CPR, several steps ought to be followed for effective performance. Following the collapse of an adult or a teenager, it is important first to dial 911. It is then encouraged that a person performs CPR through pushing fast, and hard at the patient’s chest center. CPR ought to be performed following the beat to the song “Stayin’ alive.” The rate used on pushing on the chest is 100-120 compressions every minute. Training a person to perform CPR has been found most effective when they have to remember a song whose beats aid in effective performance (Nord, 2017).

**References**

Field, J. M., American College of Emergency Physicians., & American Heart Association. (2012). *The textbook of emergency cardiovascular care and CPR*.

Lynn, P. B. (2010). *Taylor's handbook of clinical nursing skills*. Philadelphia, Pa: Lippincott Williams & Wilkins.

Nord, A. (2017). *Bystander CPR: New aspects of CPR training among students and the importance of bystander education level on survival*. Linköping: Linköping University Electronic Press.