

Transitioning Patients off Telemetry in Cardiac Rehabilitation Increasing Confidence to Exercise Independently

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Transitioning Patients off Telemetry in Cardiac Rehabilitation

Increasing Confidence to Exercise Independently

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INTRODUCTION

- Patients often fear being active again after a cardiac event.
- They need help in recognizing any new physical limits.
- Patients express feelings of fear or speak about reducing the intensity of their former exercise program due to worry that they can no longer function at their previous level.
- Also, some patients want to extend their cardiac rehab program beyond what's clinically recommended or join the facility's phase III program even when that level of supervision is unnecessary for them.

PURPOSE

- To find out if transitioning patients off telemetry before leaving cardiac rehab would help give them added confidence about their physical abilities upon program completion.
- To use non-telemetry monitored exercise and patient education to improve patient satisfaction, confidence, and Dartmouth Quality of Life (QOL) Index scores for these patients.

DESIGN

- The AACVPR Risk Stratification Algorithm for Risk of Event was used to identify patients as low risk.
- Low risk patients participated normally in telemetry monitored sessions when starting cardiac rehab.
- If patients showed no major signs of exercise intolerance or dysrhythmias, telemetry monitoring was discontinued for the last 2 weeks (6 sessions) of the patient's program.
 - Program length used was 18 sessions.
- Heart rate tracking: patients used pulse oximetry units after each exercise mode to obtain their own heart rates (observed by clinical staff) or they palpated their own pulse.
- Education topics were discussed with patients during this time about self monitoring exercise.
 - Topics discussed included using the RPE scale, manual pulse taking, personal fitness devices, and signs/symptoms of exercise intolerance.
- Data collection included:
 - Number of patients transitioned off telemetry per month
 - Pre- and post-Dartmouth Quality of Life scores
 - Press Ganey (patient satisfaction) scores were compared
 - Scores for pre-project months versus project months were compared for a survey question related to the patient's confidence level in exercising independently after completing the program.

RESULTS

- 19% (120 patients) transitioned off telemetry during fiscal year 2018.
- The bulk of these patients (97 people) were transitioned off telemetry in the second half of the year. This coincided with better improvement in Dartmouth QOL Index and Press Ganey scores from January–June 2018.
- 22.3% = overall percent improvement from pre- to post-program Dartmouth QOL Index scores for patients transitioned off telemetry.



PRESS GANEY SCORES

- Before non-telemetry project the average score was 91.9%
- After transitioning off telemetry the average score was 95.8%



CONCLUSIONS

SUMMARY

- Patients responded well to removing their telemetry monitor during cardiac rehab exercise.
 - QOL scores were on average 20% higher (pre- to post-program).
 - Patients did not resist removing telemetry.
- There were no adverse cardiac events related to non-telemetry exercise.
- Patients provided positive feedback about their transition off telemetry.

RECOMMENDATIONS/ LESSONS

- Staff commitment to changing practice and becoming comfortable with this project was a learning process.
 - It was important to reinforce the merit of the project and address staff concerns at staff meetings, through conversations, and emails.
 - A policy change was made to help solidify staff confidence in making judgments to safely remove telemetry.
- This performance improvement project led to:
 - Program change: patients in all levels of risk stratification may be transitioned off telemetry during cardiac rehab.
 - Increased staff confidence in decision making and using clinical judgment in transitioning patients beyond telemetry monitoring.
 - A new tool to help patients cope and transition past the fears associated with their cardiac event.

