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Informatics Use in Transforming Evidenced Into Practice INFORMATICS USE IN TRANSFORMING EVIDENCED INTO PRACTICE Introduction Ineffective communication among health-care staff, anesthetists, and hematologists may result in blood transfusion reactions. In addition, when they do occur, it is not always possible to identify them immediately. Informatics is one way of preventing the occurrence and severity of blood transfusion reactions.
Article 1
Gwaram et al (2012), in a study to determine the incidence, risk factors, and clinical presentations of acute blood transfusion reactions, found that there was a 3. 6% incidence rate of ATRs, establishing that it resulted from age of stored blood and previous transfusion history. They concluded that whole blood therapy should be avoided and that only appropriate blood components should be transfused. Informatics systems, such as electronic health records, can be used in identifying patients who have already had blood transfusions for health-care staff and anesthetists, while also providing a blood tracking system for hematologists and health-care staff.
Article 2
Azizi et al (2014) set out to study the prevalence of complications in blood transfusion among patients at an Iranian hospital in a 2-year period. They find that there was a 0. 4% incidence rate for acute transfusion reactions, especially related to restlessness, dyspnea, rigors, fever, chest pain, nausea, and palpitation. They conclude that that there should be a well-structure program to monitor blood transfusion-associated adverse reactions. In this case, the hospital should use appropriate visualization and statistical applications that will alert healthcare staff to health event aberrations to manage them as soon as possible.
Conclusion
Execution of informatics implementation strategies will enable health-care staff to track adverse blood transfusion reactions, as well as track blood type and age and prior patient history, all of which will aid in either managing or preventing blood transfusion reactions.
References
Azizi, S., Tabary, S., & Soleimani, A. (January 01, 2014). Prevalence of Acute Blood Transfusion Reactions in Mazandaran Heart Center, Sari, Iran, 2010-2012. Medical Archives, 68, 2, 137.
Gwaram, B. A., Borodo, M. M., Dutse, A. I., & Kuliya-Gwarzo, A. (January 01, 2012). Pattern of acute blood transfusion reactions in Kano, North-Western Nigeria. Nigerian Journal of Basic and Clinical Sciences, 9, 1, 27.