



King Chulalongkorn Memorial Hospital  
The Thai Red Cross Society

# Clinical Nursing Practice Guideline: oral care for patients with an artificial airway intubation

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## Purpose:

Patients with an artificial airway intubation cannot be cleaned orally manually. Complications with the mouth can be caused easily, especially regarding the high risk of pneumonia. Evidence-based practice (EBP) provides nurses with a method of using critically-appraised and scientifically-proven evidence for delivering quality oral care. The primary purpose of this updated guideline was to improve the oral assessment and care for patients with an artificial airway intubation.

## Methods:

The method of this EBP guideline was as follows: 1) the PICO format for finding specific questions; 2) evaluating the appropriate evidence using the work of Melnyk & Fineout-Overholt (2013); 3) an oral care guideline from a synthesis of the best practice presented at a public hearing in a hospital; and 4) all steps of this guideline were discussed with experts in the area of nursing and dentist.

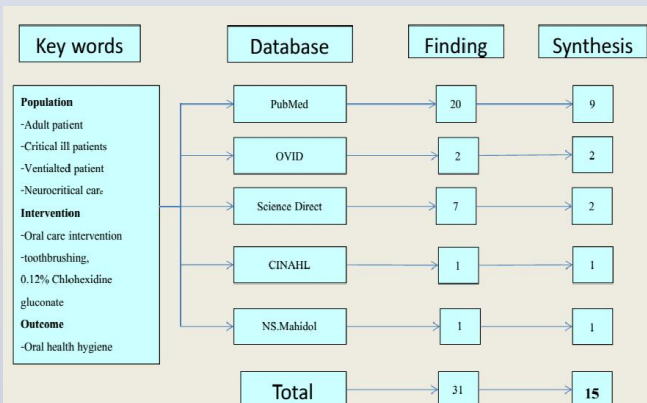


Figure 1. The results of electronic literature searching

## Results:

A computerized literature search of the online databases PubMed, OVID, ScienceDirect, CINAHL, and MS.Mahidol(2008-2012) was conducted. A total of 31 recommendations were identified, and 15 articles were eligible for inclusion. This oral care guideline has three parts:

1) preparing patients and equipment, especially 0.12 % Chlorhexidine gluconate (C-20) or 0.9% Normal saline;

2) the process of oral care by circular motion;



3) evaluating oral care using the BRUSHED assessment model.

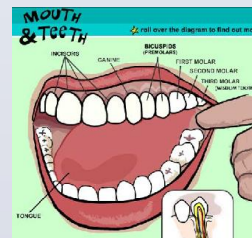


Table 1. The BRUSHED Assessment Model for standardized oral assessment.

<b>B</b>	<b>BLEEDING?</b> (Gums, mucosa, coagulation, status?)
<b>R</b>	<b>REDNESS?</b> (Gum margins, tongue? Antibiotic stomatitis?)
<b>U</b>	<b>ULCERATION?</b> (Size, shape, herpes? Infected?)
<b>S</b>	<b>SALIVA?</b> (Xerostomia, hypersalivation, characteristics?)
<b>H</b>	<b>HALITOSIS?</b> (Character? Acidotic? Infected?)
<b>E</b>	<b>EXTERNAL FACTORS?</b> (Angular cheilitis? Endotracheal tapes?)
<b>D</b>	<b>DEBRIS?</b> (Visible plaque? Foreign particles?)

Hayes, J, Jones C. A collaborative approach to oral care during critical illness. *Crit Care Health* (London), 1995;3:6.

## Conclusion:

Oral care for patients with an artificial airway intubation must be discussed by nurse that follows the appropriate guidelines because it was specific oral care for patients with an artificial airway intubation. A variance protocol for oral care which was implemented in the clinic also affected the guideline implementation. Thought, the best guideline should be implementing with well plane that put effort vial organization.

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