

Better Health, Better Lives

# Monoclonal Antibody Infusion: A Nurse-driven Collaboration

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## Purpose & Background

The COVID -19 pandemic provided a unique opportunity for many nurse-driven initiatives and collaborations. With the advent of COVID-19 treatments, the staff of Adirondack Health, implementing evidence-based practice, developed policies and protocols for monoclonal antibody infusion for out-patients diagnosed with mild-moderate COVID-19 and at risk for severe progression of the disease and/or hospitalization.

## **Objectives**

Objective 1: Develop a policy and procedure for monoclonal antibody infusion for the treatment of COVID-19

Objective 2: Mitigate the disease progression in patients diagnosed with mild- moderate COVID -19

**Objective 3:** Keep patients alive

#### Plan Do Check Act

- **P:** A review of literature and best practices was conducted in concert with pharmacy and medical staff. Suitable locations for infusion administration and staff to provide treatment were identified.
- **D**: Utilizing resources provided by the NYSDOH, the CDC and the manufacturer of Regen-Cov®, an initial policy and procedure along with accompanying documentation and forms were developed.
- **C:** Processes and procedures were continually reviewed and continue to be reviewed to achieve the most efficient and best practice.
- **A:** The finalized policy and procedure are in place and can be easily adapted and revised as treatments or locations change.



ICU RNs review orders before beginning an infusion.



Chief Nursing Officer David Mader prepares an infusion for a resident of Mercy Living Center.

# Domains of Quality Addressed

Safe
Protocols were developed and revised to maintain the safety of both staff and patients.

Infusions became available as COVID infections from the Delta variant peaked in 2021. As new variants became prominent, we were able to quickly modify protocols.

■ **Efficient** Infusions were usually scheduled within 24 hours of receiving the provider order for treatment.

■ **Effective** No patient was transferred to a higher level of care or required hospitalization for further treatment of COVID-19.

Equitable Treatment was available to all patients who met the medical criteria.

Person- As is the goal of all care provided by AH staff, patients'centered values and health goals were considered and respected.



**Outcomes Achieved** 

Patients/residents progressing to severe disease

### **Conclusions & Lessons Learned**

Being flexible and adaptable were key to the success of this initiative. Recognizing that written processes may need to be adjusted or revised to increase safety and efficiency and listening without ego to the frontline staff administering treatment, led to the development of a protocol that impacted and continues to impact the health of our community.



A nurse comforts a SNF resident during her infusion.

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Submitted on behalf of the Patient Care Services division and the staff who helped deliver this potentially life-saving treatment.

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