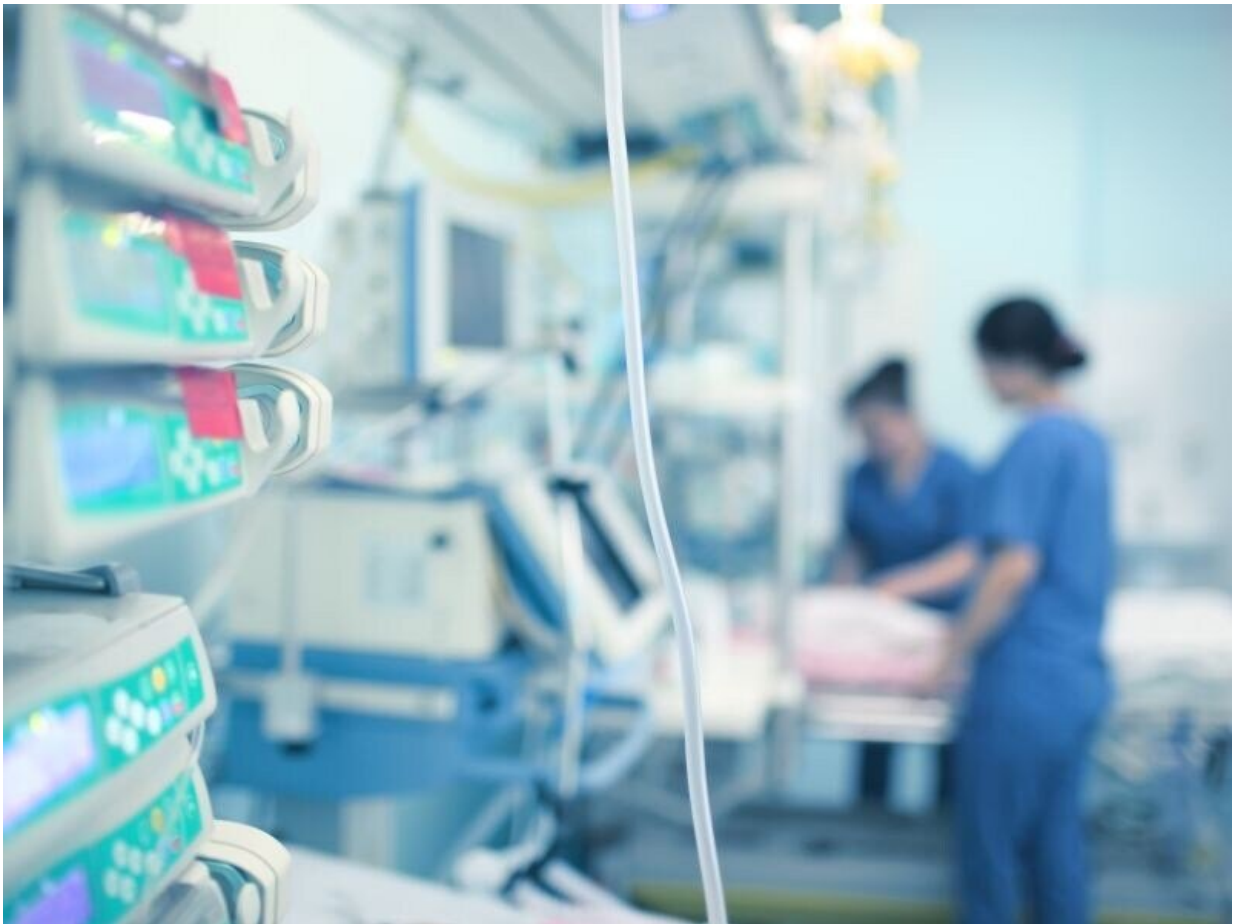


Lack of knowledge barrier to prone positioning use in ARDS

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(HealthDay)—Lack of knowledge is one of the barriers to use of prone

positioning for acute respiratory distress syndrome (ARDS), a feature of severe COVID-19, according to a study published online Oct. 9 in the *Annals of the American Thoracic Society*.

Tamar Klaiman, Ph.D., M.P.H., from the University of Pennsylvania Perelman School of Medicine in Philadelphia, and colleagues identified determinants of prone positioning utilization to develop implementation strategies that can be incorporated into a response to the COVID-19 crisis. Semistructured interviews were conducted with 30 [intensive care unit](#) (ICU) clinicians who staffed 12 ICUs. A thematic analysis was performed using the Consolidated Framework for Implementation Research (CFIR). Three focus groups were conducted with ICU leaders to develop an implementation menu.

The researchers identified five themes of determinants for use of prone positioning: knowledge, resources, [alternative therapies](#), team culture, and patient factors; these themes spanned all five CFIR domains. Five specific implementation strategies were developed and implemented at Penn Medicine: educational outreach, a learning collaborative, clinical protocol, prone positioning team, and automated alerting.

"Our study identified several broad themes of barriers to and facilitators of evidence-based implementation of prone positioning for severe ARDS, a life-saving, proven [effective treatment](#) that is administered to a minority of eligible patients," the authors write. "We have developed implementation plans for some of these strategies in our own institution and believe they can inform the increased uptake of prone positioning in response to the COVID-19 crisis."

More information: [Abstract/Full Text](#)

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