

A Collaborative Approach to Urological Care: Establishing a Urodynamics Multidisciplinary Team (MDT) Meeting

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BACKGROUND

Urological Specialty in UHW

- Formal Urodynamic (UDS) investigations a requirement for informed treatment decision making

Nurse Specialists

- Lone worker, nurse specialists in Urology & Gynaecology to perform formal UDS investigations
- Necessity to acquire new knowledge, skills and achieve competencies

The Lower Urinary Tract

- Lower urinary tract (LUT) consists of the bladder and urethra
- Function: Allows for low-pressure storage of urine with conscious control of micturition
- Sufferers of lower urinary tract dysfunction experience a significant burden on QOL

What is Urodynamics?

- Measurement of relevant physiological parameters of the LUT to assess its function and dysfunction
- A standard urodynamic test involves **non-invasive** evaluation of bladder emptying, and **invasive** assessments of bladder storage function and bladder emptying function.

• (Lenherr & Clemens, 2013)

Urodynamic Investigation Protocol:

- Urological History
- LUTS Assessment
- Validated Symptom Score (including QOL indicator)
- 3-Day Bladder Diary (FVC)
- Review of PMH & Medications
- Physical Exam
- Urinalysis
- Uroflowmetry
- Pressure flow study

• International Continence Society (ICS) Guidelines

QUALITY IMPROVEMENT INITIATIVE



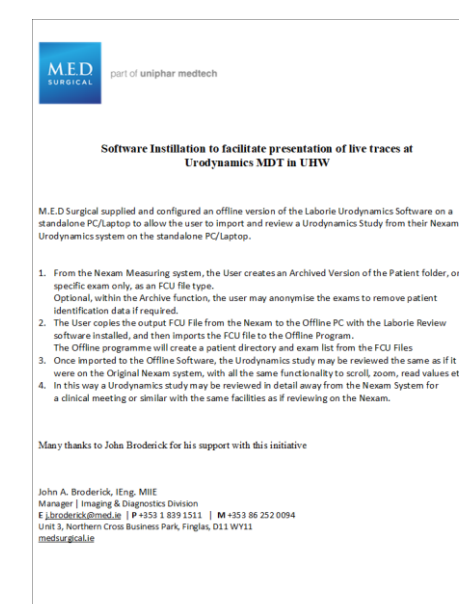
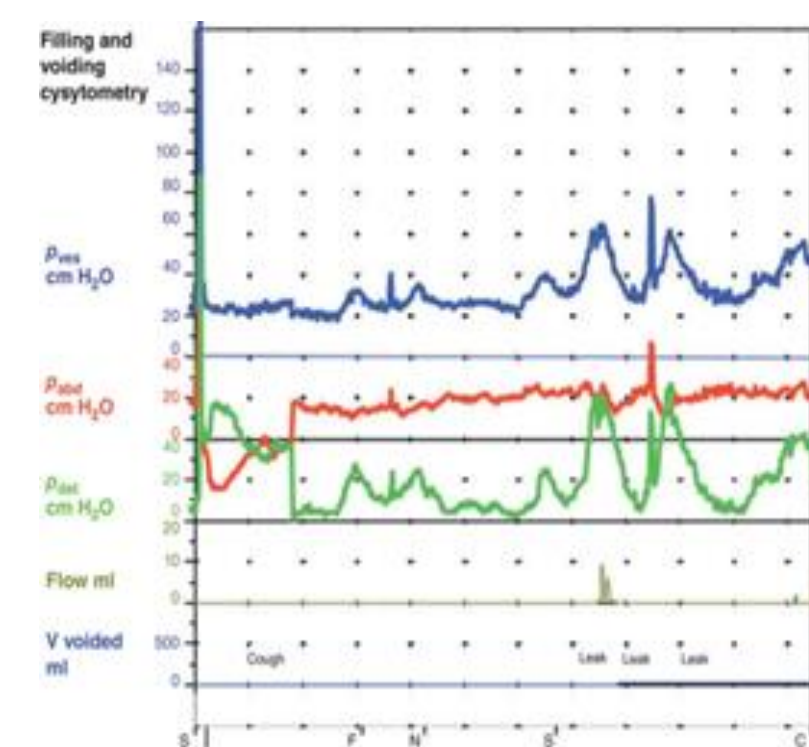
Establishment of Urodynamics MDT monthly Meeting (Both Educational & Formulate Plan of Care)

Joint Specialist Meeting:

Urology
Gynaecology
Urology nursing colleagues - UPMC Whitfield

Attendees:

Consultants, ANPs, CNSs, NCHDs, Physiotherapists, Nurses, Students



METHODOLOGY

Completed Certificate in Urodynamics in Bristol Urological Institute

Attended National Annual UDS Meetings

Attended established Urology Urodynamic MDT in Mater Hospital Dublin

Liaised with Gynaecology and UPMC Whitfield Urology colleagues to gain involvement

Formulated UHW Urodynamic MDT Meeting SOP – Approved by Consultants

Liaised with IT Dept UHW & MED Surgical to install software to facilitate discussion of live UDS traces at MDT

Liaise with Pharmaceutical/Equipment Company Reps to provide education session prior to each UDS MDT

Purpose of Meeting:

Education
Knowledge Sharing
Coordinated and efficient approach to diagnosis and management of patients with LUTS

(Abrams et al, 2018)

Agenda & Responsibilities:

ANP/ CNS presents patients UDS Investigation Protocol (as above)
NCHD outlines and interprets UDS trace in preparation for formal exams
Consultant Urologists question & provide education on quality UDS studies and interpreting traces
Findings discussed by all
Plan of care formulated by Consultants
UDS MDT documentation completed
Consultant OPD patient follow up

RESULTS

- Coordinated efficient approach & use of resources
- Shared decision making
- Increased access to specialist knowledge
- Improved communication and collaboration
- Successful, well attended MDT

EFFECT OF INITIATIVE

- Improved patient outcomes through MDT discussion
- Professional Development: enhanced skills and knowledge undertaking & interpreting Urodynamic investigations
- Adherence to evidence-based practice guidelines

SUSTAINABILITY

- Well Established
- Strong Leadership
- Ongoing Training & Education
- Patient Centred Approach
- Successful Collaboration
- Standardisation of UDS MDT
- Use of Specialist Technology

References:

Lenherr, S.M & Clemens, J.Q (2013) "Urodynamics: with a focus on appropriate indications", *Urol Clin North Am.* Nov;40(4):545-57.
International Continence Society (ICS) Guidelines - <https://www.ics.org/standards>, last accessed November 2023.
Abrams et al (2019) "United Kingdom Continence Society: Minimum standards for urodynamic studies, 2018", *Neurourology and Urodynamics*: 1-19.
HSE Quality Improve Toolkit (2019), <https://www2.healthservice.hse.ie/organisation/qps-education/quality-improvement-toolkit/>, last accessed October 2023.

Acknowledgements:

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