

Exploring NICU Nurses' Views of a Novel Genetic Point of Care Test Identifying Neonates at Risk of Antibiotic-Induced Ototoxicity: A Qualitative Study

Introduction

- Nurses are key stakeholders in ensuring the successful integration of pharmacogenetic innovations at the point of care (POC) in a NICU.
- Effective staff support POC tests to overcome barriers to uptake such as costs, QA concerns, and the additional time taken to test.

“Even if you get one baby that shouldn't have gentamicin then I think it is worth its weight.”

“You've got plenty of time to do it... it doesn't delay anything as far as I can see”

The study aimed to explore the views of NICU nurses on the deliverability of a novel genetic POC test in a clinical implementation trial (PALOH).



Perceived Clinical Utility

Staff understood the rationale of the test and felt a sense of duty to prevent potential harm to neonates.

The Golden Hour

While there were initial concerns about the time taken to test, no participants noted a delay in treatment by T2.

Device

Updates to Genedrive System have addressed key barriers to uptake, such as connectivity and data input.

Training and Support

Staff felt they would benefit from ongoing training and refreshers. Visual aids were found to be useful.

Impact

- Findings will help tailor training and support requirements to implement routine POC testing
- Relevant for nurses involved in development and delivery of genetic POC tests in acute settings

“We have had a couple of positives so if we have saved a couple of babies' hearing then we have changed their lives”

It's just become part of the admission process... it's just become what we do when we admit a baby now.”



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Conclusions

- All participants were positive about benefits of the test to the neonate and their family
- At the end of the trial, **all participants felt the test should be integrated into routine clinical practice**

