

THE EFFECTS OF EARLY FAMILY VISITATION IN THE POST-ANESTHESIA CARE UNIT (PACU) ON POSTOPERATIVE ANXIETY

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Introduction: Surgery can be seen as a threatening event by many patients. The fear of the unknown, pain and uncertain outcome can cause anxiety from the moment the surgery is scheduled. Postoperative anxiety can lead to complications that include tachycardia, tachypnea, hypertension, decreased blood flow to the surgical wound, increase in pain medication requirements, and possible lengthened hospitalization (Yilmaz, Sezer, Guler & Bekar 2011).

Identification of the problem: The immediate postoperative period can cause great stress and anxiety to the surgical patient. Patients in the PACU are still under the effect of the anesthetic agents given during surgery, accentuating their vulnerability compared to the typical hospitalized patient. Patients often request the presence of their family within minutes of being alert and oriented. However, the current practice delays family visitation up to one hour after patient admission to the PACU, unless otherwise deemed necessary.

Purpose of the Study: The objective was to evaluate the impact of early family visitation on patients' anxiety levels during the immediate postoperative period and to validate this practice as a possible non-pharmacological intervention on patients' postoperative anxiety.

Methodology: An extensive review of the literature was conducted using the Medline, CINAHAL, and Google Scholar database, and the publication archives of Journal of PeriAnesthesia Nursing from 2009 to 2014. Keywords used in the literature search included: anxiety, surgery, postanesthesia care unit, PACU, family visitation, recovery, family centered care, and family presence. The Johns Hopkins Nursing Evidence Based Practice Research Evidence Appraisal tool was used to evaluate ten research articles that met the inclusion criteria including one randomized controlled trial.

Results: Research findings provided evidence that early family visitation in the PACU is beneficial in decreasing postoperative anxiety in the adult patient population. Evidence also demonstrated that other positive effects, such as decrease pain perception, increase patient satisfaction, and overall better patient outcomes can be achieved.

Implications for perianesthesia nurses and future research: There is strong evidence to support the implementation of early family visitation in the PACU as a non-pharmacological adjunctive method to manage postoperative anxiety. Further research exploring the effects of family visitation on postoperative pain management should be encouraged.