

EARLY ORAL PAIN MEDICATIONS AND THE EFFECTS ON LENGTH OF STAY

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Introduction: Timing of pain medications varies depending on individual nursing practice and can be challenging for post-operative patients. For outpatients, pain must be controlled and maintained at a tolerable level, while achieving discharge.

Identification of the problem: Clinical observations in the outpatient post-anesthesia care setting as compared to the inpatient setting revealed two distinct practices. Outpatient PACU nurses gave oral pain medications in Phase I, while inpatient PACU nurses did not routinely administer pain medications.

Purpose of the Study: The purpose of this study was to determine whether or not timing of oral pain medications would impact length of stay, self-reported pain level at discharge, or amount of IV pain medications needed as a result of earlier control of pain.

Methodology: A quasi-experimental design was used. Data was abstracted by retrospective chart review. A convenience sample of patients undergoing outpatient laparoscopic cholecystectomy was used.

Results: 128 charts were abstracted of 64 patients that received oral pain medication in Phase I, and 64 patients that did not receive oral pain medications until Phase II. Both groups contained 14 males and 50 females. The mean age for both groups was 34.9 years old. These study findings included a statistically significant reduction in length of stay (p -value <0.001) and a statistically significant lower level of reported pain (p -value <0.001) for those patients who received oral pain medications in Phase I.

Discussion: Needs based planning and coordination beginning on admission aid in reduced length of stay, reduced waste and improved patient outcomes. Similar benefits could be realized for the outpatient surgical patient.

Conclusion: This study demonstrates that there are two differing practices among nurses, which may be due to lack of knowledge, and identifies opportunity for improved patient experience and outcomes.

Implications for perianesthesia nurses and future research: Nurses assist patients in achieving a healthy emotional state and foster healing which can be influenced through better pain management. Managed pain promotes participation in rehabilitation, activities of daily living, and reduction of risk of poor outcomes. Future studies exploring differences between in-patient and outpatient nurses' beliefs or training in regards to pain management are indicated.