

7th International Conference and Exhibition on

Pain Research and Management

October 11-12, 2018 | Zurich, Switzerland

Improving pain management knowledge

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Statement of the Problem: Pain is the most commonly presented symptom among patients who are admitted to the emergency department (ED). Unfortunately, many barriers impacting patient care and outcomes exist, in the ED, in regard to inadequate pain assessment, reassessment, and documentation. Thus, interventions to improve knowledge and practice to help nurses to improve pain assessment skills and documentation of pain are needed. Improving pain management knowledge requires more than knowledge acquisition. Based on the review of relevant literature, the need for innovative and effective pain management guidelines for nurses is well documented.

Purpose: The purpose of this quality improvement (QI) project is to determine the impact of evidence-based guidelines using TJC 2017 guidelines and the theory of acute pain management.

Methodology & Theoretical Orientation: The researcher used quantitative methods to examine the knowledge of nurses regarding pain management at Montefiore Nyack Hospital, only bedside nurses from the Emergency Department were recruited to participate in the study. An evidence-based guidelines intervention, created by the joint commission (TJC) standards, was implemented in the Emergency Department to increase compliance and utilization of pain assessment guidelines and policies among nursing staff. An middle-range theory of acute pain management was used as a nursing framework to assist implementing the guideline. Updated policies, pain scales, visual reminders, and an electronic health record icon resources were also implemented to ensure nurse compliance with TJC guidelines and policies. A pre- and post- test survey to measure the knowledge of nurses regarding pain management through the utilization of the knowledge and attitudes survey regarding pain (KASRP) instrument was used.

Conclusion & Significance: As one of the most trusted professions, nursing has a tremendous responsibility in providing quality care and outcomes. The data collected will be analyzed at the end of the DNP project implementation.

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