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# Use of Pain Management Diary as an Intervention to Reduce Pain in Post-Operative Residents on the Transitional Skilled Unit

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## BACKGROUND

- TSU- Transitional Skilled Unit
  - PT Rehabilitation, OT Rehabilitation, Speech Rehabilitation
  - “Long-term care”= Medicare guidelines
  - Pain management is one of our top interventions.
  - Pain Assessment questions completed upon admission and every 7 days.
  - To obtain a “high” star rating on pain management=pain assessment scores must be lower than 4.

## PICO QUESTION

- P- Post-operative residents admitted to the TSU for rehabilitation, who are experiencing post-operative pain
- I- Pain management diary
- C- Residents without a pain management diary
- O- Increased satisfaction with their pain management during their stay on the TSU

## EVIDENCE

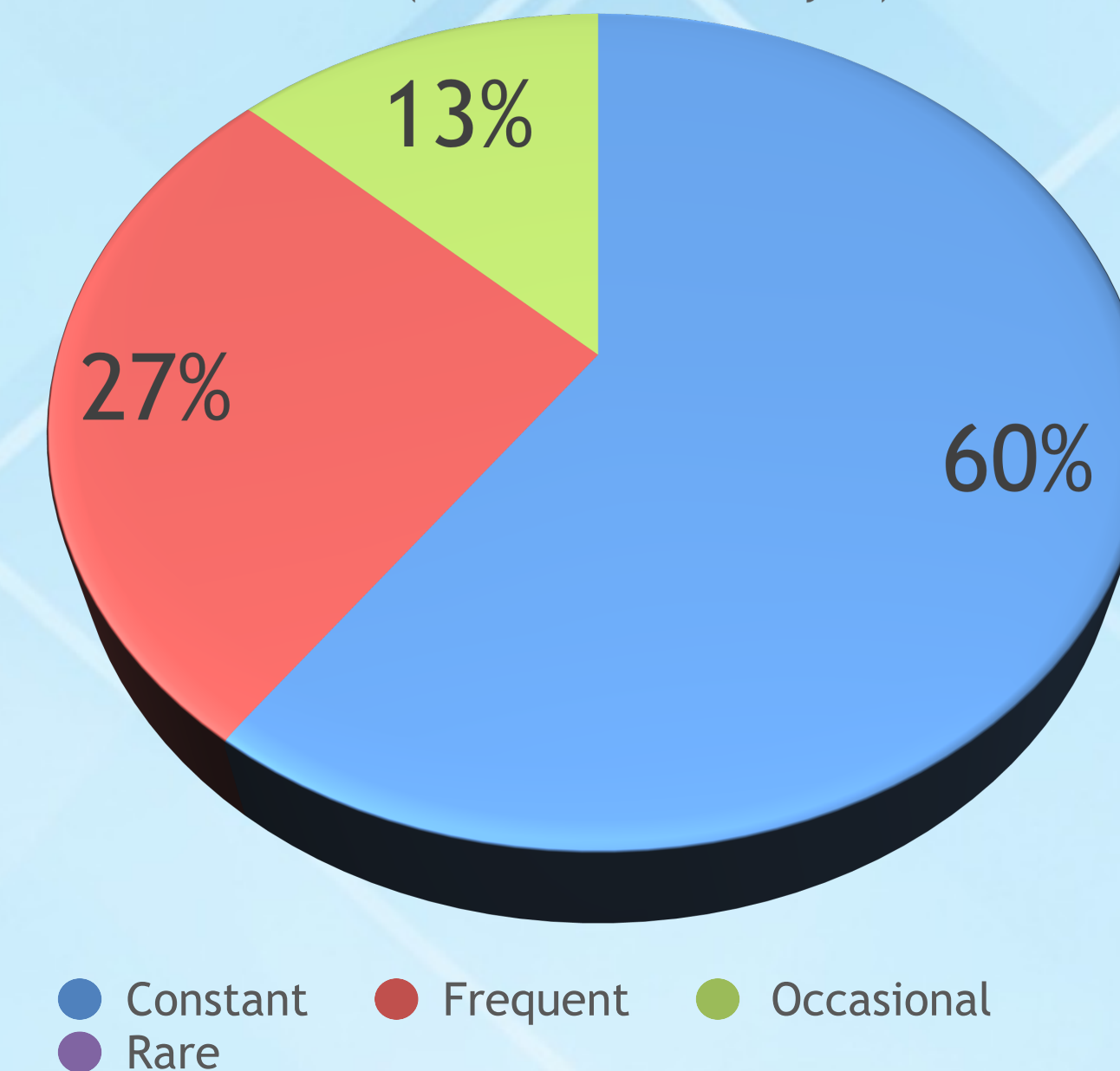
- Three significant factors that contribute to inadequate treatment of geriatric pain patients: (1) lack of proper pain assessment, (2) potential risks of pharmacotherapy and misconceptions regarding both the efficacy of non-pharmacological pain management strategies, and (3) the attitudes of the elderly towards such treatments (Gagliese & Melzack, 1997).
- Assessment and treatment of pain in the elderly requires a holistic approach with sensitivity to the special concerns of this population (Gagliese & Melzack, 1997).
- When patients are extended their right to autonomy, their pain is better managed and they report better satisfaction with pain management (Bernhofer, 2011).
- National study conducted by using telephone questionnaires to ask patients about the severity of postsurgical pain, treatment, satisfaction with pain medication, patient education and perceptions about postoperative pain and pain medications:
  - Approx. 80% experienced acute pain after surgery
  - Of these patients, 86% had moderate, severe, or extreme pain, with more pain after discharge than before discharge (Apfelbaum, Chen, Mehta & Gan, 2003).

## METHODS

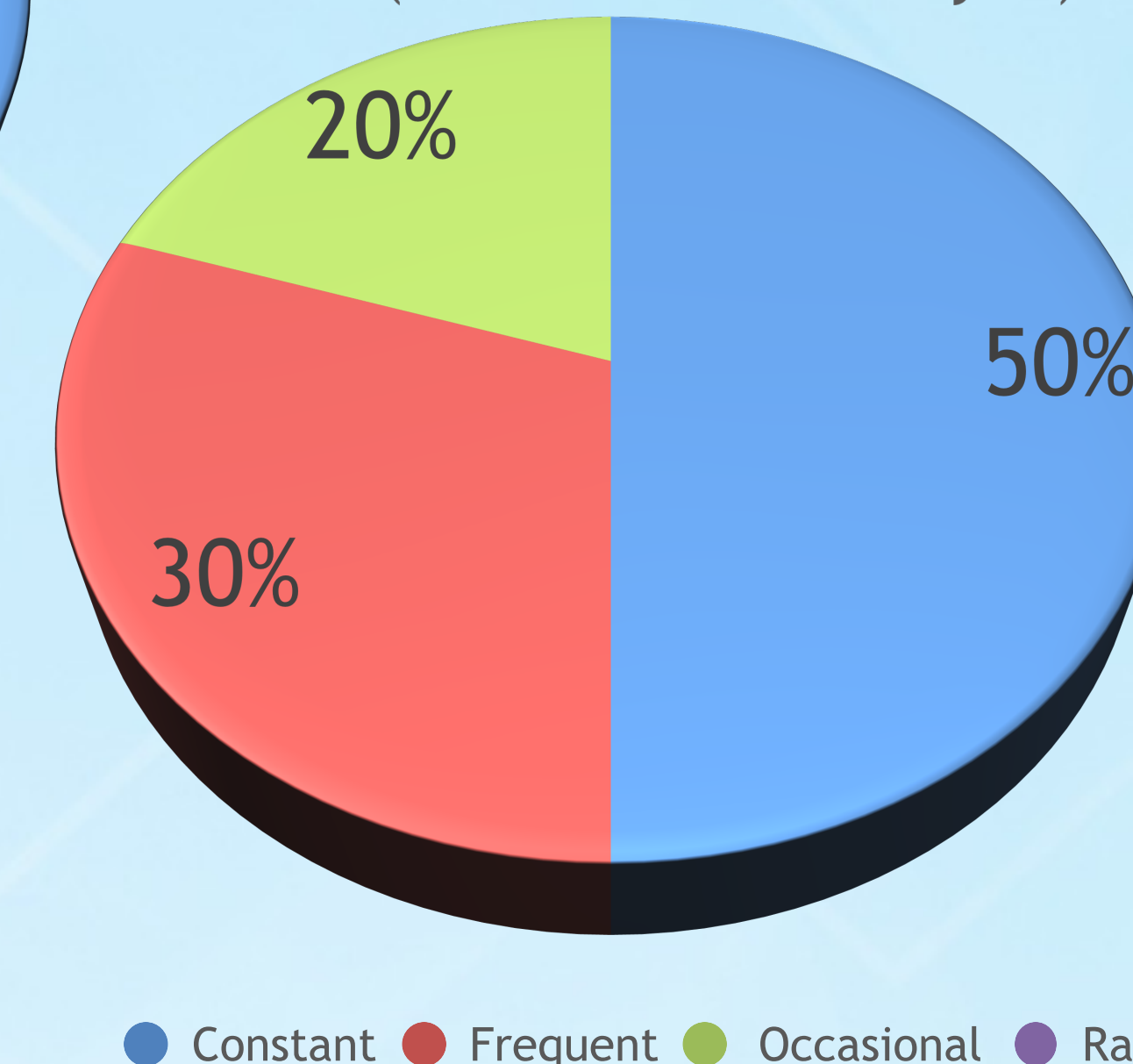
- Pre-survey Questionnaire
  - (1) Please choose a word to describe your pain while on TSU: Constant, Frequent, Occasional, Rare
  - (2) On a scale of 1 to 10, what number would you use to describe your pain on TSU most often?
  - (3) What was the best way your pain was managed while you were on TSU? Pain medication, Ice/Heat, Change of Position, Distraction, Relaxation
  - (4) Please List the names of the pain medication you were given while on the TSU
  - (5) Were you aware you had these options as “As Needed” pain medication during your stay on TSU? Yes, No
- Administration of Pain Management Journals
  - Pain Management Journals
    - List of scheduled pain medications and chart to record administration times, pain rating prior and post administration
    - List of PRN pain medications and chart to record administration times, pain rating prior and post administration
    - List of Alternative pain interventions and chart to record times and effectiveness
    - Coloring pages to be used as distraction
- Re-administration of “Pre-Survey Questionnaire”

## RESULTS

Pre-survey: Residents' Description of Post-Operative Pain (15 Residents Surveyed)



Post-Survey Results: Residents' Description of Post Operative Pain after Utilizing Pain Management Journal (10 Residents Surveyed)



## OUTCOMES

- After receiving the Pain Management Journal, no significant increase in resident satisfaction with Pain Management as demonstrated in residents' pain ratings.
- However, 100% of residents were able to restate their scheduled and PRN pain medications utilizing their Pain Management Journal as a resource.

## CONCLUSIONS

- As a result of this study there is still much to be done concerning patient satisfaction and management of post-operative pain.
- Utilizing the use of Pain Management Journals on a greater population may demonstrate a greater variation in results.
- A cost benefit analysis, literature, and multiple studies will aide in further research on this topic.

## REFERENCES

- Apfelbaum, J., Chen, C., Mehta, S. & Gan, T. (2003) Postoperative pain experience: Results from a national survey suggest postoperative pain continues to be undermanaged. *Anesth Analg*, 97. 534-40.
- Bernhofer, E. (2011). Ethics and pain management in hospitalized patients. *OJIN: The Online Journal of Issues in Nursing*, 17 (1).
- Gagliese, L. & Melzack, R. (1996). Chronic pain in elderly people. *International Association for the Study of Pain*, 70. 3-14.

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