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Item Bank Development and Testing of the Perioperative Non-Opioid Modalities (PNOM) Questionnaire: A Pilot Study

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Item Bank Development and Testing of the Perioperative Non-Opioid Modalities (PNOM)

Questionnaire: A Pilot Study

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Abstract

Background: There are validated tools available to identify surgical patients at risk of persistent opioid use, as well as protocols to decrease perioperative opioid use. However, there are no validated tools to assess the barriers and facilitators to using non-opioid modalities for the treatment of perioperative pain.

Objective: The purpose of this study was to develop the item bank for a new instrument entitled the Perioperative Non-Opioid Modalities (PNOM) questionnaire and examine its initial psychometric properties. The PNOM was designed to examine the barriers, moderators, and facilitators surrounding the nurse anesthetists' use of non-opioid modalities for the treatment of perioperative pain.

Method: A quantitative, survey study design was used in this pilot study of the PNOM questionnaire with a 7-point Likert type scale. Forty-two CRNAs completed the investigator-developed PNOM questionnaire then, subsequently, twenty-two of these CRNA's completed the PNOM again to determine the stability of their responses using the test/retest reliability procedure.

Results: After dissemination of the PNOM questionnaire to a pilot sample of participants and subsequent analysis of responses, results demonstrate that the PNOM questionnaire has been shown to have preliminary reliability and validity as a tool to assess these barriers and facilitators. This was demonstrated by an overall Cronbach's alpha of 0.737. The final PNOM questionnaire consisted of 39 items that measured barriers and facilitators to CRNAs' use of non-opioid modalities for the treatment of perioperative pain. After analysis, all 39 items were included in the final PNOM questionnaire. Each item showed satisfactory internal reliability with Cronbach's alpha greater than 0.70.

Conclusion: The validation study of the PNOM questionnaire is now underway to establish its reliability and validity as a clinical tool to examine the knowledge and opinions of CRNAs on the use of non-opioid modalities to curb the opioid epidemic. In its final iteration, it may be used in the assessment of barriers and facilitators to non-opioid modality use and the development of educational and training needs of the anesthesia provider in order to promote the use of non-opioid modalities.