Title:

Pain Reassessment in the Emergency Department

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Session Title:

Rising Stars of Nursing Invited Posters - Group 2

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 10:00 AM-10:30 AM

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 11:45 AM-1:00 PM

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 3:00 PM-3:30 PM

Keywords:

pain management and pain reassessment

References:

References Duignan, M., & Dunn, V. (2008). Congruence of pain assessment between nurses and emergency department patients: A replication. International Emergency Nursing, 16, 23-28. http://dx.doi.org/10.1016/j.ienj.2007.09.003 Eder, S. C., Sloan, E. P., & Todd, K. (2003, July). Documentation of ED patient pain by nurses and physicians. American Journal of Emergency Medicine, 21:4, 253-257. http://dx.doi.org/10.1016 Gordon, D. B., Rees, S. M., McCausland, M. P., Pellino, T. A., Sanford-Ring, S., Smith-Helmentstine, J., & Danis, D. M. (2008). Improving reassessment and documentation of pain management. The Joint Commission Journal on Quality and Patient Safety, 34 No 9, 509-517. Grinstein-Cohen, O., Sarid, O., Attar, D., Pilpel, D., & Elhayany, A. (2009, September/October). Improvements and difficulties in postoperative pain management. Orthopaedic Nursing, 28:5, 232-239. Rupp, T., & Delaney, K. A. (2004, April). Inadequate analgesia in emergency medicine. Annals of Emergency Medicine, 43:4, 494-503;

http://dx.doi.org/10.1016/j.annemergmed2003.11.019 Samuels, J. G., & Kritter, D. (2011, September). Pain management documentation: Analyzing one hospital's computerized clinical records. CIN: Computers, Informatics, Nursing, Volume 29, No.9, 512-518.

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Learning Activity:

	LEARNI NG OBJECTI VES	EXPAN DED CONTE NT	TIME ALLOT TED	FACULTY/SPE AKER	TEACHING/LEA RNING METHOD	EVALUATION/FE EDBACK
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	OUTLIN E				
Example	Example	Example	Example	Example	Example
Critique selected definition of the term, "curriculu m"	Definitions of "curriculum" Course of study Arrange ments of instructional materials The subject matter that is taught Cultural "training" Planned engagement of learners	20 minutes	Name, Credentials	Lecture PowerPoint presentation Participant feedback	Group discussion: What does cultural training mean to you?
Relate the importanc e of reassessme nt of pain to timely and effective pain manageme nt in the emergency departmen t	Backgrou nd, literature review, microsyst em assessme nt	20 min	Diane Ullery, BSN, RN, CPAN	poster presentation	question and answer, informal discussion
Identify 2 evidence-based	Literature review	20 min	Diane Ullery BSN, RN, CPAN	poster presentation	Question and answer, informal discussion

	methods			
П	that can be			
	utilized to			
П	improve			
П	pain			
П	reassessme			
	nt			

Abstract:

Purpose and Background: Inadequate management of pain in the emergency department is a significant problem resulting in decreased patient satisfaction as well as poor patient outcomes. Reassessment of the patient's pain after intervention is an essential component of successful pain management, as well as a requirement by the Joint Commission for Accreditation of Hospitals (JCAHO). Chart audits done in a Midwest trauma unit over a twelve month period revealed a lack of documentation of pain reassessment following pain intervention in an average of 45% of patients. In addition, the HCAP survey measuring satisfaction with pain management shows room for improvement. The purpose of this project was to create a protocol to improve pain reassessment documentation in the emergency department, resulting in better nursing management of pain. Literature Review: Literature supports the importance of consistent and frequent reassessment of pain as a crucial step in pain management Evidence has also shown that providing pain education for nurses along with individual feedback can be effective in improving pain reassessment. In addition, literature suggests patient satisfaction with pain management is improved with reassessments. Protocol/Intervention: The pain documentation process within the ED was assessed, which identified varying documentation practices as well as varying methods of documentation. Based on these findings, the protocol included education for nursing staff regarding required documentation for pain reassessments and the appropriate place for documentation. Documentation guidelines and standards were reviewed and clarified. Visual reminders were placed reminding staff to complete the pain reassessment, and feedback and support was provided to staff. The protocol is currently in the process of being implemented. Chart audits will continue to be monitored, with results communicated to nursing staff. Outcomes: It is expected that this protocol will increase completion of pain reassessment by staff. As a result, it is expected that patients will experience better pain management and will report improved satisfaction with the management of their pain.