Visitation within our PACU was something that had never been addressed. As with other PACUs it was not allowed. Our visitation policy was reviewed when the bed shortage situation highlighted the issue of reuniting patients and families postoperatively.

In the beginning we allowed limited family visits for our overnight ICU patients. The bed shortage quickly extended to our general surgical patient population and we soon faced a dilemma.

What happened was a domino effect. Every family member wanted to visit. It became extremely difficult to manage flow back and forth from the family surgical waiting room. We had no clear cut guidelines. By utilizing the nursing process we were able to work on developing a PACU Visitation Policy. ASPAN had already put forth a position statement regarding family visitation and we were determined to follow it.

In showcasing the development and implementation of our visitation policy, we will highlight our literature search, staff education, and guidelines for visitation. Pt privacy was a main focus as were educational plans for patients/families. Quality Improvement audits will be presented as will the actual PACU Visitation Policy.

The new PACU Visitation Policy was incorporated and had extremely favorable results. Patients and families were happier. To our surprise, so were the PACU nurses. They had control of the situation.

By implementing this new policy we dealt effectively with our problem. We also advanced perianesthesia nursing practice by promoting family centered care.