POST PACU CLIENT SURVEY
Team Leader: Denise E. Smith, RN, CCRN
Portland VA Medical Center, Portland, OR
Team Members: Jennifer L. Johnson, RN, BSN, MS, CPAN;
Tim Harrington, PSA, nursing research; Linda Kitchen, RN, BSN;
LaVonne Anderson, RN, BSN, CGRN; Ellen Lane, RN, BA

Problem Identified: A rapid response was called for three clients that had been through the recovery room within 24 hours prior to the event. We found that all three events were related to pain crisis and subsequently overmedication. As a unit, we wanted to find out how our care in the recovery process affected the continuum of care for our clients in post op recovery.

Objectives: To determine overall client satisfaction with the PACU experience. We also wanted to determine the ward RN’s satisfaction with client status upon transfer from PACU, and increase collaboration between PACU and ward RN’s with the mutual goal of optimizing pain management. With the information gained from our first set of data we made some adjustments in our order sets and protocols for PCA pain management, and developed new order sets and protocol for PONV. Our objective now is to revisit this year’s survey data to see how our new practices have impacted the PACU experience and our client’s post surgical recovery process in general.

Process of implementation: An interview tool was developed. It was then presented to the ward staff for ease of use, efficiency and revision. Ward RN’s were responsible for client surveys upon transfer to the ward. Clients were interviewed within 24 hours of surgery when possible by PACU RN staff. We completed our initial interviews, compiled data, made some changes in our practice and followed up with a second set of interviews.

Statement of the successful practice: Client satisfaction with pain control, presence or absence of nausea and vomiting, and overall evaluation of PACU nursing care. Ward nurse’s assessment of pain control upon arrival to the ward. Quantifiable data served as a baseline for our pain control improvement project.

Implications for advancing the practice of perianesthesia nursing: Support of starting PCAs in the PACU. Support for the benefit of early PONV assessment and treatment. Support for expanding the awareness of the surgical clients continuum of care.