USE OF PICTURE COMMUNICATION AIDS TO ASSESS PAIN LOCATION IN PEDIATRIC POST-OPERATIVE PATIENTS
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Introduction/Problem: Children undergoing surgical procedures may have difficulty communicating due to language barrier, disability, temporary inability or temporary unwillingness to speak. A need exists for a standard communication strategy for post-operative children with communication barriers. Augmentative and Alternative Communication (AAC) picture communication may facilitate nurse-patient communication in post-operative pediatric patients.

Purpose: The study purpose was to: 1) determine if inconsistency exists between nurse assessment of pain location versus identification of pain location using AAC picture communication aids in study sample, and 2) determine parent satisfaction with use of AAC picture communication aids.

Methodology: A convenience sample of 35 post-operative patients, ages three to nine years, with diagnostic coding of tonsillectomy and adenoidectomy (T&A) only were recruited in the PACU of a Midwestern freestanding pediatric hospital. The patient’s pain location was assessed using an AAC picture communication aid. A non-PACU staff nurse data collector used a standard script to provide partner assisted communication and scan the pictures for the child as needed. The PACU nurses’ pain assessment including location of pain was obtained from the electronic medical record. Parent Satisfaction was measured through completion of a ten item satisfaction survey.

Results: The study sample of 33 patients with complete data resulted in 160 data points for analysis. Nurses did not document the location of pain in 29.4% of the data points. Inconsistency existed between nurse and patient assessments of pain location in 37% of the data points. Response rate to the parent satisfaction survey was 97.1%. Respondents agreed that: 1) satisfaction with care was increased by use of pictures after surgery (68%) and 2) pictures helped my child identify where he/she hurt (85.6%).

Discussion/Conclusion: Nurses did not consistently document location of pain as an element of pain assessment and, when documented, the surgical site was inaccurately identified as the location of pain. Parents were satisfied with use of AAC picture communication aids.

Implications for Perianesthesia Nurses and Future Research: The study results indicate that AAC picture communication aids are effective for identification of pain location in post-operative pediatric patients. Further research on use of AAC picture communication aids in other post-surgical patient populations is indicated.