“TO SEE WITH MY OWN EYES”:
IMPACT OF A PHASE I FAMILY VISIT IN THE POST-ANESTHESIA CARE UNIT (PACU) ON SELECTED PATIENT AND FAMILY OUTCOMES
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Introduction/problem/purpose: With increased focus on the quality of the patient experience, and as the body of knowledge about family visits in the PACU grows, the purpose of this study was to evaluate specified outcomes of a 5-10 minute, Phase 1 family visit in the PACU for patients undergoing total hip or total knee replacement and their identified family members.

Recently, Illinois state regulations changed, allowing PACU family visits. PACU visits are also recommended by the American Society of Peri-Anesthesia Nurses. However, family visits have not been routinely allowed in the PACU of this Magnet designated facility. The purpose of the study was to determine if brief family visits during Phase 1 recovery were safe and effective for spinal anesthesia patients undergoing hip or knee replacement.

Methodology: This quasi-experimental, descriptive, mixed methods study included 62 patient/family dyads; subjects served as their own control. The visit was preceded by a baseline assessment of state anxiety for both; patients had baseline mean blood pressure (MBP) and heart rate (HR) measured. Satisfaction with the visit was evaluated using a simple, uni-dimensional question. A semi-structured interview, after discharge, provided a thick, rich description of the experience.

Results/Discussion: Demographics revealed that patients and family members were similar to the general population of joint-replacement patients. Using the Spielberger State Anxiety Inventory, patient and family anxiety was significantly reduced ($p < .001$) with the visit. Further, they were highly satisfied with the visit, as reported just after, averaging $> 3.9/4$, a result which persisted post-discharge.

The visits were also safe as demonstrated by no significant differences in patient MBP and HR during or after the visit; further, no family member experienced an untoward response. Qualitative data analysis revealed an overarching theme: Patients and family members simply wanted to “see with my own eyes” that their significant other was fine.

Conclusion/Implications: Short, supervised Phase I family visits are safe and significantly reduce patient/family anxiety at a time of high vulnerability. This study supports ASPAN’s recommendation for family visits in the PACU. More research is needed to determine the appropriateness of brief, early visits for all PACU patients who request them.