

Implementation of Acupressure as Adjunct Therapy to Reduce Postoperative Nausea and Vomiting

Team Leader: Melissa Joo MPH MSN RN CPAN

Hospital of University of Pennsylvania, Philadelphia, Pennsylvania

Team Members: Amy Kim MSN RN CCRN CPAN, Megan Lau BSN RN,

Colleen Moser MSN RN CPAN, Tara Reap BSN RN, Tiffany M. Snow DNP RN ACNS-BC CCRN

Background Information: Postoperative nausea and vomiting (PONV) is a common surgical issue that can result in complications such as, electrolyte imbalance, dehydration, pulmonary aspiration, and wound dehiscence. Additionally, PONV can delay hospital discharge, subsequently affecting hospital costs. Substantial research suggests that utilizing a multimodal approach combining prophylactic pharmacologic antiemetics with non-pharmacological therapies can reduce PONV, therefore decreasing the need to utilize multiple doses of rescue antiemetic therapy. Studies have also demonstrated that acupressure can shorten the time from extubation to “ready for discharge” from PACU. Acupressure can produce additive effects with minimal side effects and without potential for adverse drug reactions.

Objectives of Project: The objectives of the project include: (1) Provide education to nursing staff regarding the benefits of acupressure therapy for patients; (2) Educate nurses on the application of acupressure (3) Reduce patient’s nausea by adding acupressure into treatment regimen

Process of Implementation: Six perioperative nurses designated as super-users, were instructed by a licensed acupressure provider on the utilization of acupressure for postoperative nausea and vomiting. Instruction was provided on the application of stimulation to specific points or defined pathways on the body (acupressure) that can relieve nausea. Educational sessions with the licensed acupressure provider were comprised of Zoom interactive web sessions, live in-person training, and evaluation of technique at patient bedside. Once deemed competent, the super-users provided acupressure for ambulatory PACU patients who were identified as being at high risk for PONV or for patients who were reported to be experiencing PONV. Super-users assessed severity of nausea before and after the implementation of acupressure to determine effectiveness by using the Edmonton scale.

Statement of Successful Practice: 45 out of 48 patients who received acupressure stated that “they felt less nauseous after acupressure”. The evaluation of their Edmonton scores indicated that acupressure, along with nausea medications, reduced PONV.

Implications for Advancing the Practice of Perianesthesia Nursing: Acupressure is a non-invasive nursing intervention that provides a non-pharmacologic alternative in the treatment of PONV. Application of acupressure could be incorporated into new-hire orientation for perianesthesia nurses, in education for the treatment of PONV. Utilization of acupressure could decrease the use of pharmacologic therapy, reduce the postoperative complications, and ultimately improve patient outcomes.