NURSE PERCEPTION OF A PAIN AREA LOCATION TOOL

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Introduction: Pain is the most commonly experienced symptoms in healthcare settings. Because pediatric patients often suffer sub-standard pain control, pain management is a concern.

Identification of the problem: Currently guidelines for pain assessment indicate the patient is the most reliable indicator of pain. However, language barriers, developmental delays or surgery, may inhibit patient's ability to verbally report pain. A new innovative Pain Area Locator (PAL), tool was developed addressing a gap on effective tools identifying pain location in pediatric post-anesthesia patients.

Purpose of the Study: The purpose of this study is to determine nurse perception of the PAL tool usability, effectiveness and satisfaction in locating pain in pediatric post-operative patients.

Methodology: A convenience sample of 17 post-anesthesia care unit (PACU) nurse participants utilized the PAL in their pain assessments for five days. Children were asked to point to the picture that corresponded with where they hurt. At the end of five days, a 28-item survey on the nurse's perception of the PAL was completed.

Results: 308 patients were seen: 168 males and 140 females. The PAL was used 34% of the time with average age 6.89 years. Mean usability, effectiveness and satisfaction scores indicated nurse participants had neutral feelings on the use of the PAL. Satisfaction was statistically significant, indicating nurses with 5 or less years experience were more satisfied using the PAL compared to nurses with 6-20 years' experience.

Discussion: As the use of the PAL increased, usability, effectiveness, and satisfaction decreased, suggesting the more the PAL was used the more needed improvements were found.

Conclusion: Nurses participating in the study had neutral feelings about the PAL providing insights and suggestions for improvement.

Implications for perianesthesia nurses/ future research:

The Mesko-Eliades Pain Area Locator (Pal) tool was developed as a means for pediatric patients to identify their location of pain. Nurses indicated before additional study is conducted, improvements are needed on the existing PAL tool. Larger pictures and enhanced colors, will improve clarity making the tool easier to use. Future research should be considered on a general nursing floor where anesthesia is not a factor and a multi-site study.