## Factors Nurses Consider when Making the Decision to Medicate for Pain in the PACU: The Embedded Knowledge Within Practice

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**Introduction:** Within the clinical setting, pain and sedation scales alone are not enough to support clinical judgment with acute pain management (Jarzyna et al., 2011).

**Identification of the Problem:** Because sedation measurement rests along a fluctuating continuum, it is possible for a patient to be sedated and then shift to increasing alertness, and then to drift back to a sedated state. This potential for acute clinical transition can be challenging to nurses of all levels from novice to expert.

**Purpose of the Study:** The purpose of this study was to examine how nurses working in the Post-Anesthetic Care Unit (PACU) identify and describe excessive sedation and what criteria they use to make decisions about medicating patients for pain.

**Methodology:** Utilizing Heideggarian Hermeneutics methodology, 20 expert PACU nurses were asked to participate in open-ended interviews regarding their lived experiences. Interviews were audiotaped, transcribed and analyzed using an interpretive team and a modified seven-stage process for interpretation by Diekelmann, Allen, and Tanner (1989).

**Results:** Four themes identified through the participant's stories were; recognizing every patient is different, engaging in iterative knowing, walking a fine line, and looking beyond and anticipating. This study identified a constitutive pattern of interpreting sedation by integrating practical understanding and anticipating beyond.

**Discussion:** This study captures the meaning of sedation in terms of the whole nursing gestalt, looking beyond the scales and the monitors, at a deeper level of understanding. Their ability to recognize sedation and adapt their practices comes from years of experience which challenges them to transfer that knowledge to the novice nurses in practice.

**Conclusion:** This study indicates a deeper complexity in the way sedation is assessed and balanced with pain management by nurses in the PACU.

**Implications for Perianesthesia Nursing and Future Research:** The nurses from this study were dynamic, insightful, and perpetually interpreting sedation by integrating their practical understandings and anticipating beyond. The results of this study will inform the development or refinement of sedation scales with the goal of improving sensitivity and specificity to capture all aspects of opioid induced sedation.