



PeriAnesthesia and Aromatherapy: A Proactive Approach to Address Postoperative Nausea at a Comprehensive Cancer Center for Patients Recovering from Complex Surgical Interventions



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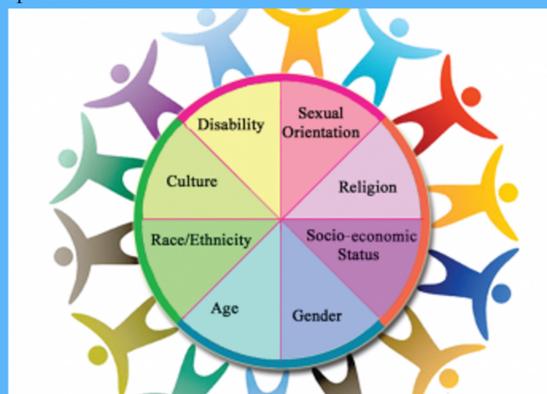
INTRODUCTION

Many of our patients will experience postoperative nausea in our recovery area. Our patient population varies in age, gender, socioeconomic, social, and culture. Therefore, an alternative for traditional antiemetics was our priority to address the needs of patients and improve their postoperative experience. As an alternative approach to address postoperative nausea, an idea of aromatherapy for the treatment of postoperative nausea emerged.



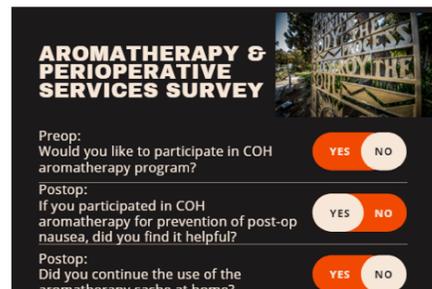
IDENTIFICATION OF THE PROBLEM

Postoperative nausea and vomiting have been identified issues for patients across a continuum for many decades. Through which various approaches have served many patients and provided positive outcomes with pharmaceutical treatment. Aromatherapy is a new approach in treating patients' postoperative nausea. This approach offers an alternative to traditional treatment, thereby providing our patients with options that may be more culturally diverse to meet their specific needs.



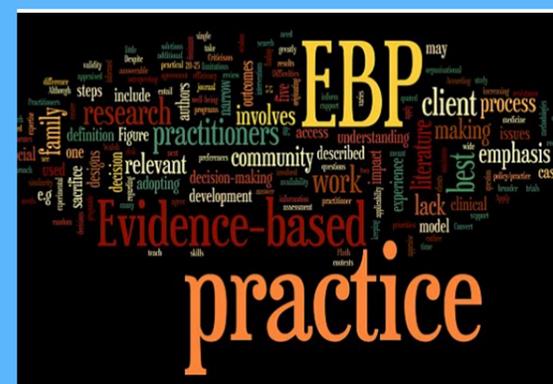
Aromatherapy: PeriAnesthesia Phases of Care

Aromatherapy: TEAM Leaders & Change Agents



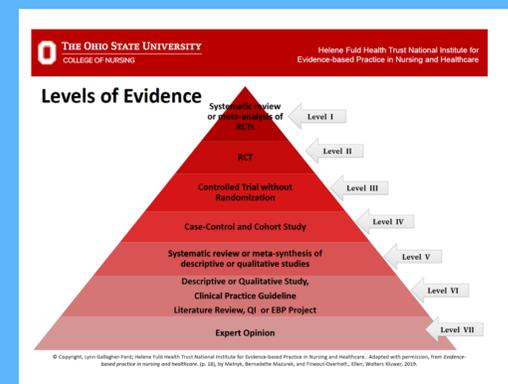
EBP QUESTION/ PURPOSE

Among postoperative surgical patients in an acute oncology hospital, how effective is applying aroma tabs to patient's surgical gowns, compared to receiving intravenous pharmaceutical antiemetics at preventing postop nausea?



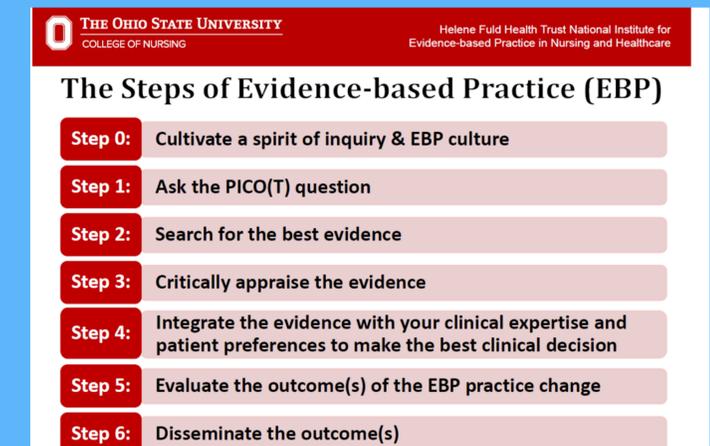
METHODS/ EVIDENCE

The literature search included CINHL, PubMed, and Cochrane database. The Fuld Institute for EBP (evidence-based practice) level of evidence was utilized. The highest level of evidence yielded was Level II Randomized Control Trial and Level VI Descriptive Study.



SIGNIFICANCE OF FINDINGS/OUTCOMES

The outcome findings of the evidence presented within the literature review suggest the implementation of aromatherapy to treat postoperative nausea will improve patients' recovery during the postoperative phase of care. Our plan is to have the product available in March and implementation in April 2022. Our team will utilize the Fuld Institute Steps of EBP model for implementation to ensure the improvement of patient outcomes, enhancement in nursing practice and practice change sustainability.



IMPLICATIONS FOR PERIANETHESIA NURSES AND FUTURE RESEARCH

Improving oncology patients' postoperative surgical experience by enhancing their recovery phase with the implementation of aromatherapy can be beneficial to diverse patient populations. Future state, perioperative patients can benefit from aromatherapy beginning in the preoperative phase, through the intraoperative phase, and postoperative phase. This positive experience can last throughout their surgical journey, thus improving patients' overall satisfaction with their perioperative experience.