

Post Operative Nausea: How to Educate Patients and Improve LTR Scores



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Purpose

The purpose of this educational intervention was to increase patient knowledge of post-operative, at-home use of aromatherapy for nausea, with the aim of improving subsequent nausea education (SNE) and patient likelihood to recommend (LTR) survey scores

Background

Post-operative nausea is experienced by patients (Marsh et al., 2022). Anesthesia has an amnesic effect, so RN education in the PACU may be forgotten by the time patients return home.

Forgetting SNE at home may potentially impact LTR scores. Patient satisfaction scores are linked to quality of care (Elvir-Lazo et al., 2020).

The PACU Unit Partnership Council reviewed Press Ganey patient satisfaction surveys to identify opportunities for improvement. From November 2022 through October 2023, scores were low for subsequent nausea information, indicating a need to improve patient education on this topic.

We determined that a prop, such as aromatherapy which is easily accessed and used for post-operative nausea (Marsh et al., 2022), would likely remind patients of post-anesthesia teaching.

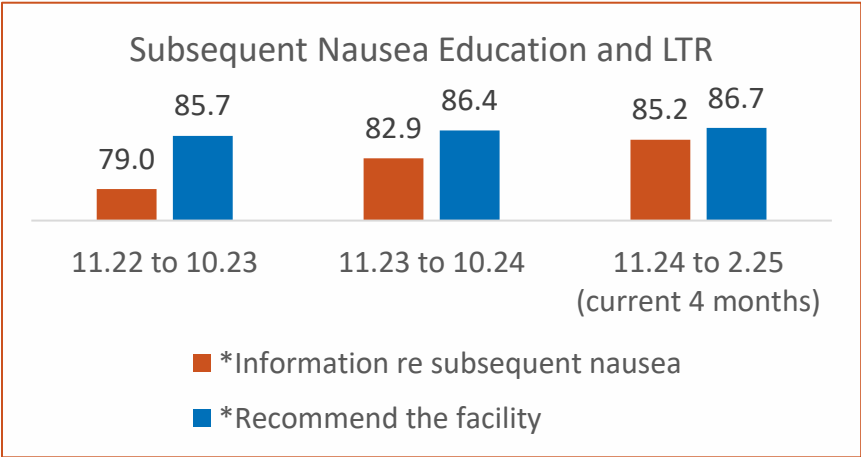
We developed aromatherapy use for patient SNE and RN education processes with potential to positively impact subsequent nausea education and LTR survey scores.



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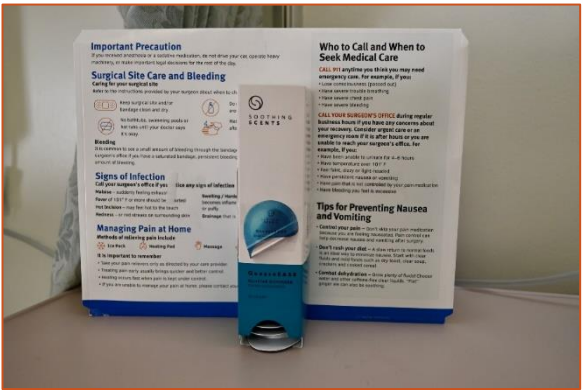
Methods

- Initiated 11/23; 143-bed community hospital, 10 bay PACU, 17 PACU nursing staff; “Busy” day volume: about 40 patients; general, gynecologic, orthopedic, urology procedures
- Educated PACU staff on aromatherapy patient placement as reminder to discuss subsequent nausea
- Patient pre-PACU discharge education, when most awake/able to remember, focused on tips to prevent nausea (control pain, don’t rush diet, stay hydrated); information also in discharge folder
- 1/2024 test of change: Placed one QueaseEASE (Soothing Scents, Inc., Newton, AL) aromatherapy vial on patient and placed another in discharge folder
- 3/2024 test of change: Developed nausea information card to send home with patients with QueaseEASE attached
- 6/2024: Redesigned information card and translated nausea card into five languages (Farsi, Mandarin, Russian, Spanish, Vietnamese)



Results

- Since the launch in 11/2023 through 2/2025, SNE survey scores increased by 3.9%; LTR survey scores increased by 0.7%.
- Compared to the pre-implementation survey score of 11/22 (79.0%), subsequent nausea education survey scores increased by 6.2% by 2/25 (85.2%); LTR survey scores increased by 1.0%.
- SNE tests of change scores increased by 12.6% (1/24 (75.5%) – 2/24 (88.1%), 7.6% (3/24 (81.2%) – 4/24 (88.8%), and 10.0% (6/24 (80.0%) – 7/24 (90.0%).
- LTR tests of change scores increased for the first and third tests of change by 5.5% (1/24 (80.7%) – 2/24 (86.2%), and 5.8% (6/24 (83.0%) – 7/24 (88.8%)), and decreased by 0.7% (3/24 (88.1%) – 4/24 (87.4%).



Implications/Conclusions

Implementing a post-operative, subsequent nausea patient education initiative that included aromatherapy, an accessible complementary and alternative medicine therapy, improved subsequent nausea education and LTR survey scores. This project demonstrated that thoughtful patient education via simple strategies can positively impact patient satisfaction.

This success suggests that live in-person in-services and asynchronous or virtual on-demand learning are feasible strategies to reinforce anti-nausea practices in the PACU, which has potential for expansion to other nursing units.

Future research opportunities include continuing this PACU project in collaboration with receiving units to evaluate the effectiveness of anti-nausea measures in postoperative care for inpatients, and exploring relationships between patient education, aromatherapy, prevention of nausea/vomiting, and key metrics such as PACU/Inpatient length of stay.

References

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