

Abstract

SG-ANZICS1196

Differences in Nurses' Perceptions of Pain among Intensive Care Patients According to Nursing Experience

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Objectives:

The purpose of this study is to clarify whether nurses show different perceptions of pain in patients based on their intensive care unit (ICU) nursing experience. Clarifying the perception of pain among nurses with high experience will enable less experienced nurses to provide better care for their patients.

Methods:

Questionnaires were sent to the nursing department managers of 276 medical facilities, who then disseminated the questionnaires to consenting ICU nursing staff. The fundamental attributes for categorizing the results were years of ICU nursing experience and pain evaluations. Perceptions of pain in ICU patients were assessed through 23 conditions on pain felt by patients, 19 conditions on behaviors exhibited by people in pain, and 11 conditions on the aspects considered important for pain assessment besides the patient's physical state. To determine whether there were differences in the perceptions of the patients' pain based on ICU nursing experience, respondents were divided into 5 groups accordingly. A chi-square test was used to compare the pain perceptions among these groups.

Results:

A total of 1,063 responses were analyzed. The respondents' average years of ICU nursing experience was 5.3 years. The Numeric Rating Scale was most commonly used for pain evaluation (54.3%). Significant differences were observed in 3 conditions assessing pain felt by patients (sore throat, dry mouth and thirst after extubation, and lethargy) and 3 conditions assessing important factors for pain assessment apart from the patient's physical state (surgical history, anxiety, and accomplishment of recent work and duties) according to ICU nursing experience.

Conclusions:

There were no differences in the perceptions of behaviors exhibited by patients in pain by ICU nursing experience. However, there were differences in perceptions of the pain felt by patients and the important factors related to pain assessment apart from the patient's physical state.