ABSTRACT

This action research approach study was conducted to develop a Pain Assessment Protocol (PAP) for nurses caring for postoperative orthopedic patients. Five nurses and fourteen patients participated in the implementation of the PAP and eleven patients were interviewed regarding their satisfaction before the use of the PAP. The study was conducted for three months. Data was collected from interviews, participant observations, and review of nursing notes and patients record. Data analysis was analyzed by content and comparative analysis and simple statistic.

Three themes were identified from the practice before the use of the PAP and these were: 1) routine care for postoperative patients involved taking observation of vital signs, assessment of circulation, elevation of affected part and administration of prescribed postoperative analgesics, 2) providing emotional support and comfort, 3) knowing patient in pain from verbal complaint of patient, asking patient about pain and observing patients' expression, and 4) no consistency in documenting about patient's pain. The practice of pain assessment before the use of PAP was not effective due to no formal postoperative pain assessment. Difficulties encountered by nurses with their practice before the use of the PAP were categories into the following themes: 1) different pain experience among patients, 2) unpredictable pain, and 3) overestimation of pain by relatives. PAP was developed and implemented to help nurses to improve their practice of pain assessment.
The PAP consists of a pain assessment tool with the Numerical Rating Scale, guideline and documentation. The process of using the PAP consists of 1) explain to patients how to give a score to their postoperative pain, 2) assess postoperative pain, 3) take appropriate interventions for pain management, 4) evaluate pain management provided, and 5) document pain intensity and pain interventions. Major outcomes from the use of PAP were: 1) postoperative pain assessment was included into the routine postoperative care of patients, 2) nurses were able to use the PAP effectively, 3) PAP provided a communication tool for nurses to communicate effectively with patients, doctors and relatives, and 4) PAP provided a documentation tool for nurses to document patient’s postoperative pain and pain intervention provided.

There was an increase in the number of patients satisfied with the pain management after the used of PAP compared to the number of patients satisfied before the use of PAP, as nurses gain skills in assessing, evaluating and documenting patient’s pain. The highlight from this study was that nurses were able to incorporate postoperative pain assessment into the routine postoperative care of their patients and there were information recorded about patient’s pain intensity and pain intervention given.
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