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Pain in the surgery department

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Background: The treatment of pain must be aimed at the patient, adjusted to the culture, based on a correct appraisal, and be given in a safe and timely manner. Lack of an appropriate response to the patient's complaints may cause slow recovery, high morbidity, extension of the hospitalization, high costs, and lack of satisfaction and even frustration. A clear policy, adherence to standards, the training of staffs, and instruction of patients are a part of the construction of a quality system for the treatment of pain.

Objective: To examine the relation between the types of treatment of acute pain and the quality of the treatment of post-operative pain.

Method: A cross-sectional research. Three questionnaires used – evaluation of pain questionnaire, instruction questionnaire, and patterns of treatment of pain questionnaire.

Results: 172 patients participated, mean of age of 53.2 ± 18.1 years. 93.9% suffered from pain at an intensity of ≥ 4 on the VAS scale. About 60% reported that the pain influenced their mobility, and 50% reported that the pain disturbed their sleep. A statistically significant difference was found in the intensity of the pain reported among the patients who received analgesics around the clock as opposed to patients who received according to SOS ($\chi^2=6.67$, $P=0.030$).

Conclusions: A clear policy, adherence to standards (Around the clock treatment), the training of staffs, and instruction of patients are a part of the construction of a quality system for the treatment of pain.

Biography

Member of the Israeli society of psychosomatic in obstetrics & gynecology. A psychiatric rehabilitation trained professional and an associate lecturer in the Departments of Nursing, Social Work and Multidisciplinary Studies in Zefat Academic College, and in the Department of Multidisciplinary Studies in the University of Haifa, Israel. Specializing in research of Post traumatic symptoms and crisis experience after childbirth.

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