



THE UNIVERSITY
of ADELAIDE

PACU Nurses & Postoperative Pain: A Focused Ethnography

Priya Nayar

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STATEMENT

This work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

I give consent to this copy of my thesis, when deposited in the School of Nursing library, being available for photocopying and loan.

PRIYA NAYAR

DATE

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ABSTRACT

BACKGROUND: The post-anaesthetic care unit (PACU) is the first place that patients are taken following their operation and it is here that the initial recovery from their anaesthetic and surgery happens. Accordingly a significant proportion of the PACU nurse's time is involved with the assessment and management of pain in the postoperative patient. Despite the implementation of standardised tools such as pain rating scales and medication protocols, the assessment and management of postoperative pain varies markedly from one patient to another in the PACU. Taking this into consideration, the researcher sought to understand how PACU nurses interpret pain assessment and management of the postoperative patient.

AIM: To understand the processes PACU nurses utilise when assessing pain and implementing subsequent pain management in patients following surgery.

METHODOLOGY: The qualitative approach of focused ethnography was used to frame this study. Focused ethnography was considered to best portray the perspectives of PACU nurses, as a culture, regarding the assessment and management of postoperative pain.

METHODS: Ten PACU nurses were recruited from the PACU of a government hospital. The experience of the participants ranged from 3 years to more than 20 years in PACU nursing. James Spradley's ethnographic research cycle was used to frame the research process. The research design employed two methods of data collection: participant observation and individual interviews. Collected data was transcribed and thematic analysis conducted.

FINDINGS: Five themes emerged reflecting the perspectives of PACU nurses on the assessment and management of postoperative pain. These themes are: *With Surgery Comes Pain*; *The Picture Beyond The Wound*; *Knowing*; *The Individual Experience*; and *Bridging Surgical Care*. There are many complexities involved in assessing and managing postoperative pain in the PACU. Underpinning the five themes, communication was seen to be an integral aspect of assessing and managing postoperative pain from the PACU nurse's perspective.

CONCLUSION: This study represents a population of nurses who identify strongly with working in a unique clinical environment. The findings give insight to the multi-dimensional process that PACU nurses employ to be able to provide proficient care of postoperative pain to their patients; and, this study illustrates that the PACU fosters a distinct sense of culture amongst its nurses when considering the assessment and management of pain in the postoperative patient. The significance of this research is that there is no set method of pain assessment and management the PACU that could be taught from a textbook. Postoperative pain assessment and management is a highly individualised process that continuously changes with variables that are introduced by both the PACU nurse and the patient. Further research is required to develop knowledge about this particular environment.