45

Recognizing Pain In The JCAHO Compliant Environment: Are We There Yet?

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Background: Pain is common among hospitalized patients, yet current management is often inadequate. Many studies have demonstrated under-recognition of pain as a cause of inadequate pain control. In response to these findings, JCAHO and other regulatory agencies have implemented guidelines or requirements to improve pain recognition. JCAHO requires all patients to be screened and assessed for pain on a regular basis, which relies heavily on nursing to use pain as the fifth vital sign to increase pain recognition. The effectiveness of these guidelines has not been studied. This study is designed to determine rates of pain recognition among health care providers of hospitalized general medicine patients as well as to understand the effect of pain documentation on patient satisfaction.
Methods: A sample of 187 hospitalized general medicine patients within a larger cohort study of hospitalist care admitted from July 1st 2001 through October 31st 2001 were included. Presence and severity of pain as well as satisfaction with pain management were assessed using Picker Commonwealth patient satisfaction questions asked 30 days post discharge. Rates of pain recognition were assessed by documentation within the medical record by nursing, house officer, and attending notes. Data were analyzed for the medical team as a whole and by provider-type. Comparison of recognition rates among team members and the association of pain documentation and satisfaction with pain management were analyzed with Chi 2. Associations of pain score (average pain score, first pain score, last pain score, highest pain score determined from nursing flow sheet 0-10 pain scale) with patient satisfaction were analyzed using t-tests.
Results: 55.6 % of patients reported pain. The medical team recognized 90% (94/104) of patients with pain. Significant differences in rates of pain recognition were seen among members of the health care team. When compared to attendings (74.8% recognized) and house officers (84.6% recognized), nurses (53.8% recognized) were significantly less likely to recognize pain ($p=0.002$ and $p<0.001$ respectively). Among patients reporting moderate or severe levels of pain, these patterns persisted. There was no association of satisfaction with pain management to presence of or patterns of documentation among team members' notes. Nor were there any significant association between pain score and patient satisfaction.
Conclusions: Pain recognition in this study was higher than in previous similar studies, perhaps reflecting a growing awareness of pain. However, 10% of patients with pain were unrecognized as having pain by their health care team. Of particular interest is the almost 50% of pain missed by nurses given the reliance upon nurse recognition in most pain management guidelines. These results have important implications in understanding methods of improving pain management in hospitalized patients.

Author Disclosure Block:

C.T. Whelan, None; **M. Ogilvie**, None; **L. Jin**, None; **D.O. Meltzer**, None.