Innovation of Pain Assessment Tool for NDH ICU patients
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Introduction
Pain is an unpleasant sensory and emotional experience associated with actual or potential tissue damage. ICU patients experience pain not only during invasive procedures, but also during routine care such as turning. Unrelieved pain might lead to delirium, prolonged mechanical ventilation and ICU stay, even increased mortality rate. However, pain management in critically ill patients is often inadequate. For effective pain control, an appropriate pain assessment tool is essential. In our unit, Visual Analogue Scale (VAS) and Faces Scale have been adopted. These 2 self-report dependent assessment tools seem to be unavailing for non-verbal patients. In pursuit of pain care improvement, it is necessary to adopt a standardized well tested assessment tool. Critical-Care Pain Observation Tool (CPOT) is chosen for its validity, reliability and high sensitivity and specificity. By implementing the tool for a pilot period, we aimed to evaluate the feasibility and nurses’ attitude towards this tool.

Objectives
- To implement CPOT on non-verbal ventilated patients
- To describe nurses’ evaluation of the feasibility, satisfaction and clinical significance with the 2-month implementation of CPOT in NDH ICU
- To improve pain assessment and management in ICU

Methodology
- Pre-implementation questionnaire about perceptions on pain assessment and management to nurses
- Small group training session with video about general knowledge about pain, pharmacological knowledge on analgesics and sedatives to facilitate pain management and the use of the CPOT including its scoring method
- Quiz for compliance check after the training session
- 10 nurses as link nurses to facilitate training progress and recommend the use of CPOT routinely
- Inclusion of designed CPOT chart sheets with reference sheet of CPOT instructions into ICU flow sheets
Result
- Over 95% of participants (39/41) reported that the educational training including training session with video and clinical support was helpful in facilitating the implementation of CPOT.
- Feasibility of the CPOT was positively supported by nurses evaluations.
- A majority (80-95%) rated that the CPOT was simple to comprehend and complete, and it enabled them to conduct a quick pain assessment.
- Majority agreed that they feel more comfortable with giving analgesics according to CPOT assessment.
- The use of CPOT rated 3.7 out of 5, suggesting a general satisfaction of CPOT use among nurses.