Evaluating Medical-Surgical Nurses’ Knowledge and Attitudes Regarding Pain: A Descriptive Comparative Analysis

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Introduction

Pain is a universal problem of great magnitude in the United States. The combined incidence of acute and chronic pain in the United States is approximately 100 million people. The cost of pain and its management in the United States is associated with an estimated loss of $635 billion dollars a year in decreased workforce productivity.

Nurses are on the forefront of this issue with the capacity to assess and respond to patients’ needs. Nurses’ knowledge and attitudes toward pain can predict the nurses’ ability to adequately meet patient’s pain reduction needs.

Objectives

1) Replication of 1996 and 1997 attitude towards pain studies1-7: Compare attitudes and knowledge about pain from a convenience sample of medical-surgical nurses in 2013 (n=55) with nurses from 1996 (n= 120) and 1997 (n= 450) to determine if nursing attitudes and knowledge about pain management have changed.

2) To examine if any demographic characteristics (age, education, etc.) influence nurse’s attitudes toward patients in pain.

Methods

Design:

• Cross-sectional, descriptive, comparative design. Present sample compared to original 1996 sample results.

Setting, and Sample

• Convenience sample of hospital staff NJ RN’s (n=55).

Measures:

• The Nurses’ Knowledge and Attitudes Survey Regarding Pain (NKASRP) and a demographic survey. Test-retest reliability (r > 0.80) was established by repeat testing in a continuing education class of staff nurses (n = 60). Internal consistency reliability was established (alpha r > 0.70) with items reflecting knowledge and attitudes.

Data Collection Method:

• Survey Monkey and paper and pen surveys were accessed by the nurses.

The 1996, 1997 study samples provided the baselines for comparison.

Data Analysis:

• Descriptive Statistics were conducted to determine any significant characteristic differences in samples.

• Chi Square analysis was conducted to determine any significant attitude and/or knowledge differences between samples.

• Correlation analysis was conducted to determine correlations between sample responses.

Results

Demographics:

<table>
<thead>
<tr>
<th>Year</th>
<th>Gender Male</th>
<th>Gender Female</th>
<th>Age 18-54</th>
<th>Age &gt;55</th>
<th>Education Diploma</th>
<th>Education Associate</th>
<th>Education B.S.</th>
<th>Education Masters</th>
</tr>
</thead>
<tbody>
<tr>
<td>1996</td>
<td>65%</td>
<td>35%</td>
<td>80%</td>
<td>20%</td>
<td>30%</td>
<td>50%</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>2013</td>
<td>60%</td>
<td>40%</td>
<td>75%</td>
<td>25%</td>
<td>40%</td>
<td>45%</td>
<td>15%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Comparison of Vignette Treatment Choices 1997 and 2013

<table>
<thead>
<tr>
<th>Patient Characteristics</th>
<th>1997</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under High Stress</td>
<td>56%</td>
<td>51.5%</td>
</tr>
<tr>
<td>Grimacing</td>
<td>44%</td>
<td>42.8%</td>
</tr>
<tr>
<td>Under Low Stress</td>
<td>28%</td>
<td>30%</td>
</tr>
<tr>
<td>Smiling Patient</td>
<td>56%</td>
<td>51.5%</td>
</tr>
<tr>
<td>Under Moderate Support</td>
<td>42%</td>
<td>51.5%</td>
</tr>
<tr>
<td>Worse Than Patient</td>
<td>4%</td>
<td>4%</td>
</tr>
</tbody>
</table>

Conclusions

• Despite a significant increase in the level of educational, the 2013 nurses responses did not demonstrate any significant gains in knowledge or attitude related to pain management.

• Results indicate that nurses in the 2013 study had the empirical knowledge to identify the patient as the best source for level of pain, but that when the evaluation was made to medicate, the application of empirical knowledge falls short.

• This exposes a gap in practice, for the nurse at the bedside to adequately evaluate patient’s pain and provide the relief that would allow for proper healing.

• Nursing education needs to evaluate this gap analysis and introduce pain management in all levels of clinical preparation, as well as updating information during the years of professional hospital service.

References


