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Training Pain Resource Nurses: Changes in Their Knowledge and Attitudes

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Purpose/Objectives: To determine the changes in knowledge and attitudes of pain resource nurses (PRNs) as a result of an intensive pain management course.

Design: Pre- and post-test design.

Setting: A Veterans Administration hospital in the southeastern United States.

Sample: 18 RNs from multiple units where care is provided for veterans with cancer.

Methods: The PRNs were tested before and after a 32-hour intensive pain management course.

Main Research Variables: Knowledge about pain management, attitudes toward pain management, and attitudes toward patients in pain.

Findings: Significant improvements were found in pain knowledge and attitudes toward patients in pain. Improvements in attitudes toward pain management approached significance.

Conclusions: The improvements in scores not only supported the effectiveness of the course but also provided additional evidence of the validity of the assessment instruments.

Implications for Nursing: Courses such as this should be offered in other settings to encourage practicing nurses to provide better care to patients in pain and to serve as role models for their peers.

Sues related to pain management in hospitalized patients with cancer have received much attention, with repeated studies indicating that patients continue to experience pain despite their pain management regimens (Davis & Walsh, 2004; Jubelirer et al., 1998; Levy, 1996; Maxam-Moore, Wilkie, & Woods, 1994; Yates et al., 2002). Although physicians order the types and doses of analgesics, nurses are in the best position to influence patients' pain from moment to moment. When patients complain of pain, nurses assess and manage the pain and teach patients about pain control. Nurses advocate for patients when medications ordered are not effective and can have a real impact on patients' pain management outcomes.

Many factors can lead to poor management of pain experienced by patients. Investigators have identified characteristics that may be related to reporting of pain by patients and assessment of pain by nurses. Characteristics of patients included severity of illness, gender, age, and ethnicity (Allcock, 1996; Berry, Wilkie, Thomas, & Fortner, 2003). Nurse characteristics included years of experience, age, and educational background (Allcock). Another area of research related to pain management has included nurses' beliefs and attitudes (Fothergill-Bourbonnais & Wilson-Barnett, 1992;

Key Points . . .

- The 32-hour training program improved pain knowledge and attitudes in nurses.
- ➤ The results supported validity of the assessment tools.
- Continuing education in pain management should be offered in other settings.

O'Brien, Dalton, Konsler, & Carlson, 1996). Other research has indicated that one reason for poor pain management involves nurses' lack of knowledge (Fothergill-Bourbonnais & Wilson-Barnett; Glajchen & Bookbinder, 2001; O'Brien et al.; Vortherms, Ryan, & Ward, 1992).

Research on the effectiveness of educational programs on pain management has been mixed. Camp-Sorrell and O'Sullivan (1991) found that education about pain management did not result in changes in nurses' behavior. McCaffery and Ferrell (1995, 1997) and Dahlman, Dykes, and Elander (1999) found that pain management education did have a positive impact on behavior. McCaffery and Ferrell (1999) found that although nurses have become more informed about pain assessment, they still lack the basic knowledge to manage pain appropriately. Gunnarsdottir, Donovan, and Ward (2003) called for research to determine which components of educational interventions are needed to improve pain management by nurses.

Research Objectives

The objective of the current study was to determine the effect of an intensive, weeklong pain management course on the knowledge and attitudes of unit-based nurses who were

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