

Music Therapy in the PACU: An Evidence Based Practice Project on Multimodal Pain Interventions

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BACKGROUND

- The PACU is a post-anesthesia care unit where postoperative patients recover from surgery.
- PACUs are known as the Grand Central Station of American hospitals due to noise of open bays and foot traffic from operating rooms.¹
- Outside of surgical pain, being unable to relax is the highest rated psychological discomfort in postoperative patients.²
- Up to 85% of surgical patients develop persistent postoperative pain, which left untreated can lead to increase opioid use after discharge.³

LOCAL PROBLEM

- The project site was the main PACU of a Level I trauma urban hospital in southeastern Tennessee.
- Management identified over-medication related to poor healing environment and extended recovery times as a problem within the unit.
- The purpose of this project was to implement a more holistic approach to pain management by determining if the addition of music therapy improves postoperative patients' care in the PACU.
- The aim of the project:
 - Decrease POP and anxiety scores by 25% within patient recovery time.

METHODS

- The Evidence-based Practice Improvement process model was used as the framework for this project.
- Literature search and critical appraisal demonstrated good and consistent evidence supporting use of music therapy to decrease postoperative pain and anxiety.
- Music implementation and data collection plans were made via PDSA (Plan-Do-Study-Act) Cycles.
- Outcome measures were divided into 2 phases, with the first collecting baseline data on postoperative pain and anxiety and the second collecting the same with the addition of music therapy to PACU care.
 - Each phase consisted of 300 patient data scores

In patients experiencing pain and anxiety arriving to PACU, there was a *statistically significant* relationship between music satisfaction and its benefit and help in reducing pain and anxiety.



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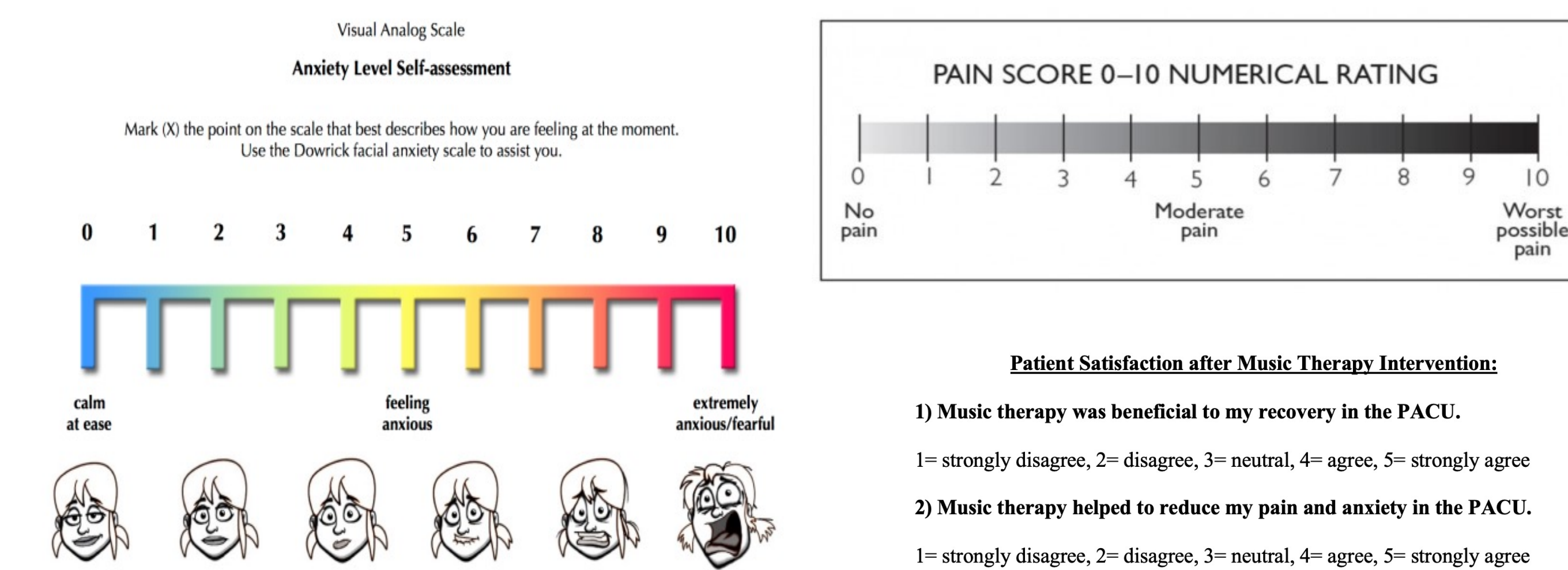


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INTERVENTIONS

- In phase 1, pain and anxiety scores were collected once patient arrived to PACU and again after PACU care was complete and patient was signed off from Anesthesia's care.
- In phase 2, music therapy was added to PACU care, and the same scores were collected .
 - Those who received music therapy answered a 2-part patient satisfaction survey.



RESULTS

- The interaction between music therapy with pain and anxiety scores was not statistically significant, meaning with or without music therapy, PACU care reduced pain and anxiety.
- In patients who felt pain upon arrival to PACU, there was a statistically significant relationship between music therapy satisfaction and its reduction of pain and anxiety. In patients who felt anxiety upon arrival to PACU, there was a statistically significant relationship in music therapy satisfaction and its benefit to their recovery.

CONCLUSIONS

- Implementing this quality improvement project helped improve patient satisfaction in recovery.
- In this project site, implementing music therapy into PACU care was a zero-cost, sustainable quality improvement practice change with the potential for positive impacts on patients and staff involved in the recovery process.
- Treating pain holistically in postoperative patients can increase their recovery experience satisfaction.