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POST-OPERATIVE NAUSEA AND VOMITING IN ADULTS

Kristina Vasnaik, BSN, TNS, CNRN, SRNA
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INTRODUCTION
Postoperative nausea and vomiting (PONV) is a common concern for patients undergoing surgery. PONV is estimated to affect 20-40% of patients undergoing surgery and is a significant contributor to hospital costs, general anesthetics, and up to 80% of high-risk patients (Gan, 2017). The condition can significantly impair surgical complications and is a leading cause of nausea and vomiting in ambulatory care patients. Patients report being dissatisfied and dissatisfied with PONV and report that “the avoidance of PONV is a greater concern than the success of post operative care” (Gan et al., 2001). PONV can increase time spent in the recovery room, expanded nursing care, and can increase healthcare costs (Gan et al., 2013).

In reference healthcare climate, the phrase “patient satisfaction” is a hot buzzword. Patients are asked to fill our surveys about their healthcare experience and rate their satisfaction and it is directly linked to reimbursement. Since the risk for PONV can be quite high, it can affect many people satisfaction scores. Appropriately diagnosing and treating PONV can prevent PONV and increase patient satisfaction scores. Unfortunately, as a nurse or pre-op nurse at the operating room, it is part of my pre-operative patient assessment and history to assess the patient’s history of PONV and ask about a history of previous abdominopelvic surgery. In my short time in the operating room, I have seen variations in the management including prophylaxis and exclusion of PONV. As an advanced practice provider, I have the opportunity to provide patients information about PONV for my patients. I choose to complete this project to help me learn more about PONV and not widely understood so that I can increase my knowledge base and select appropriate medication therapy for my patients and ultimately decrease patient discomfort in perioperative patient care. By following evidence-based practice.

DEFINITION
PONV is defined as any emetic episode beginning from surgery to 24 hours after surgery (Lai et al., 2010). PONV has been divided into two categories: postoperative nausea (PON) and vomiting (POM). Postoperative nausea is the absence of vomiting and is defined as the feeling of nausea, without retching or vomiting (Gwaltney et al., 2013). It is distinguished by its presence or absence of retching and vomiting (Ritchie et al., 2005). The common symptoms of PONV are vomiting, nausea, and retching.

RISK FACTORS
• Postoperative nausea and vomiting (PONV) is a complex issue and involves many different receptors and pathways in the body. Nausea is described as “an unpleasant sensation referred to a desire to vomit not associated with an expulsive muscular movement” (Shaikh et al., 2016).
• PONV can increase time spent in the recovery room, expanded nursing care, and can increase healthcare costs (Gan et al., 2013).
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