The Symptom Management Model, Time to Analgesia and the Experience of Pain in the Adult Emergency Department

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Aim: To explore current literature surrounding factors influencing the health services outcome of time to analgesia and patient centered outcome of patient experience of pain in the adult emergency department, using Dodd et al's (2001) symptom management model

Method: Literature review using Medline, CINAHL, Psycinfo and Web of Science to identify variables within key spheres of influence (Person, Health and Illness and Environment) from the Symptom management model and the effect of these variables on time to analgesia and the experience of pain in the adult emergency department

Results: Current literature shows that age and gender have well demonstrated influence on time to analgesia, with patients less then 13 and greater then 65 years receiving less and slower analgesia. The relationship for gender is more complicated with gender concordance being more important then gender of the patient, however generally females receive more and faster analgesia for most conditions. Environmental factors including crowing, census and access block and time of arrival are discussed in the literature, however there is limited evidence that these factors are associated with time to analgesia and no reported evidence with the patient experience.

Conclusions: A complete model of the influences of a health services outcome of pain, such as time to analgesia and patient experience does not exist in the literature. Dodd et al's (2001) symptom management model provides a well-structured framework for examining factors that influence these important outcomes models. Further research in this area will help to identify health service interventions that can improve patient outcomes in the adult emergency department. The patient experience of pain in the adult emergency department requires the development of a standardised tool with which to model such an outcome in multiple settings.

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Key Words

Adult Emergency Department
Analgesia
Olgioanalgesia
Modelling