Family presence during cardiopulmonary resuscitation and invasive procedures: practices of critical care and emergency nurses.

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Research Article

Family presence during cardiopulmonary resuscitation and invasive procedures: Practices of critical care and emergency nurses  $* ** \hat{a}^{2} ... \hat{a}^{2} ... \hat{a}^{2} ...$ 

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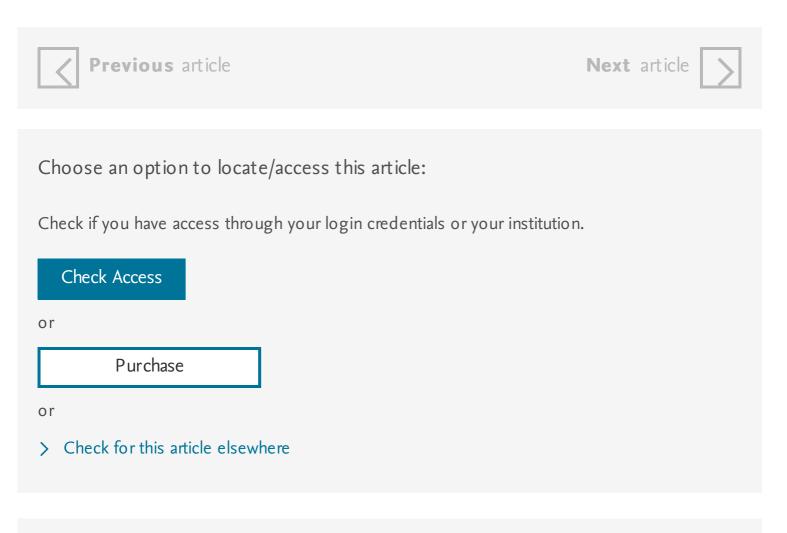
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## **Abstract**

Background: Increasingly, Patients' Families Are Remaining With Them During Cardiopulmonary Resuscitation And Invasive Procedures, But This Practice Remains Controversial And Little Is Known About The Practices Of Critical Care And Emergency Nurses Related To Family Presence. Objective: To Identify The Policies, Preferences, And Practices Of Critical Care And Emergency Nurses For Having Patients' Families Present During Resuscitation And Invasive Procedures. Methods: A 30-ITEM Survey Was Mailed To A Random Sample Of 1500 Members Of The American Association Of

Critical-Cake inurses and 1500 inlembers of 1 he emergency inurses association.

Results: Among The 984 Respondents, 5% Worked On Units With Written Policies Allowing Family Presence During Both Resuscitation And Invasive Procedures And 45% And 51%, Respectively, Worked On Units That Allowed It Without Written Policies During Resuscitation Or During Invasive Procedures. Some Respondents Preferred Written Policies Allowing Family Presence (37% For Resuscitation, 35% For Invasive Procedures), Whereas Others Preferred Unwritten Policies Allowing It (39% For Resuscitation, 41% For Invasive Procedures). Many Respondents Had Taken Family Members To The Bedside (36% For Resuscitation, 44% For Invasive Procedures) Or Would Do So In The Future (21% For Resuscitation, 18% For Invasive Procedures), And Family Members Often Asked To Be Present (31% For Resuscitation, 61% For Invasive Procedures). Conclusions: Nearly All Respondents Have No Written Policies For Family Presence Yet Most Have Done (OR Would Do) It, Prefer It Be Allowed, And Are Confronted With Requests From Family Members To Be Present. Written Policies Or Guidelines For Family Presence During Resuscitation And Invasive Procedures Are Recommended.



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A prospective evaluation of ketofol(ketamine/propofol combination) for procedural sedation and analgesia in the emergency department, the female ending annihilates the casing.