COMMUNICATION ABILITY, METHOD, AND CONTENT AMONG NONSPEAKING NONSURVIVING PATIENTS TREATED WITH MECHANICAL VENTILATION IN THE INTENSIVE CARE UNIT

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Objective To describe the communication ability, methods, and content among nonspeaking nonsurviving patients treated with mechanical ventilation in an intensive care unit.

Methods Fifty patients who received mechanical ventilation and died during hospitalization were randomly selected from all adult patients (N = 396) treated in 8 ICUs in a tertiary medical center during a 12-month period. Clinicians’ notes, use of physical restraints, and medication records were reviewed retrospectively. Data on communication method, use of sedation/analgesia (within 4 hours of communication event), and use of physical restraints were recorded on an investigator-developed communication event record for the first 10 communication episodes documented in each patient’s record (n = 275). Message content and method were recorded for every documented communication episode (n = 694), resulting in a total of 812 content and 771 method data codes.

Results Most charts (72%) had documentation of communication by patients at some time during mechanical ventilation. Most
documented communication exchanges were between patients and nurses. Primary methods of communication were head nods, mouthing words, gesture, and writing. Physical restraints were used in half of the patients. However, most of the documented communication episodes (127/202, 62.9%) occurred when physical restraints were not in use. Communication content was primarily related to pain, symptoms, feelings, and physical needs. Patients also initiated communication about their homes, families, and conditions.

- Conclusions A clinically significant proportion of nonsurviving patients treated with mechanical ventilation in the intensive care unit communicate to nurses, other clinicians, and family members primarily through gesture, head nods, and mouthing words.