Running Head: THIRD DRADT MANUSCRIPT

1

Journal: Journal of Hospice and Palliative Nursing (JHPN).

Reference style: American Medical Association (AMA) Manual of Style, 10th edition.

Word/page limit: The Manuscript length should be no more than 20 pages, that includes all references, tables, and figures. The abstract limited to 200 words.

Improving the Management of Pain at End of Life for Hospitalized Oncology Patients

Author: Fatima Al-Rashed, RN, BSN, MBA, MSc

Advisor: Sharon Dudley-Brown, PhD, FNP-BC, FAAN

Mentor: Dr. Samer Abushulliah, MD

"On my honor, I pledge that I have neither given nor received any unauthorized assistance on this paper."

F. Al-Rashed

Abstract

Aims: to improve the quality of care at end of life for hospitalized oncology patients by providing best practices of effective pain management. **Background:** A consistent theme among all cancer patients is the presence of pain caused by the cancer itself or the cancer treatments. Cancer pain is identified as a global health concern (WHO, 2007). In order to achieve effective pain management, there should be evidence-based practice guidelines and policies to guide nursing staff to appropriately assess and manage the pain of the terminally ill patients. Intervention: implementation of adult cancer pain management guidelines from National Comprehensive Cancer Network (NCCN), provide pain management education to nursing staff. **Design:** Pretest posttest quasi-experimental quality improvement study. Setting: all medical, surgical and oncology units. Study Population: all end of life oncology patients and medical, surgical and oncology nursing staff. Result: the implementation of EBP guidelines and education showed a significant reduction of the pain intensity and statistically significant (p < .0001). The patient's and family satisfaction increased significantly from pre-intervention to post-intervention which shows statistically significant improvement after the intervention implementation with (p<.0001). In addition, the staff knowledge significantly improved after the pain management educational sessions with (p<.0001). Conclusion: implementation of EBP and education improve the pain management, patient and family satisfaction and increase the staff knowledge.