Perceived Anxiety of the Nurse Anesthetist of Parent Presence during Induction of Anesthesia Judith A. Arrington RN, BSN Faculty Sponsor: Bernadette Roche, EdD, CRNA, APN

Background: Parent presence during induction of anesthesia (PPIA) is a fairly new concept that is being implemented in order to incorporate family involvement with the pediatric patient in the operating room. Previous studies have not researched PPIA's effect on the anesthetic provider, specifically nurse anesthetists. Objectives: This study examined the nurse anesthetist's perceptions, attitudes, and emotions regarding PPIA; and possibly past experiences which can affect the anesthetic provider's peri-operative anxiety possibly impacting the outcome.

Methods: An IRB approved qualitative content analysis study was conducted. Research participants from the Illinois Association of Nurse Anesthetists (IANA) database were recruited via electronic mail containing a link to demographic and open-ended questions. Results: The study yielded a 5% response rate. The majority of study participants (66%) reported that their current hospital workplace did not participate in PPIA. Amongst those that participated in PPIA: 40% reported increased levels of anxiety, 35% reported no change in their level of anxiety and 25% reported their level of anxiety was based on the actions of the parent present. When asked to describe thoughts in general related to PPIA, 43% responded with negative views while 33% responded with the commonly used theme 'dependent on parent, child, and/or situation'. When prompted to describe experiences regarding PPIA, 29% described positive experiences and 31% revealed both positive and negative experiences based on the pre-operative informative process.

Conclusion: Most nurse anesthetists stated that their level of anxiety and outcome was dependent on selection of the parent/child/situation and the thoroughness of the explanations and expectations set for the parent chosen to participate in PPIA. Many would choose to implement oral midazolam as a more reliable and effective tool to decrease patient and provider anxiety; reserving PPIA for special situations.