

## **The Role of Pediatric Nurse Practitioners in the Tonsil and Adenoid Study**

**Ruth Z. Bachman, Kathleen M. DiGaudio, Margaret T. Menninger**

**(Pediatric Clinics of North America, Vol 28, No 4, November 1981)**

Numerous reports in the literature support the ability of the nurse practitioner to perform effectively the skills of history-taking, physical examination, assessment of illness, and counseling in hospital, clinic and community settings. This article describes the role of the pediatric nurse practitioner (PNP) and the implementation of these skills in yet another clinical setting, the clinical research project. The authors address the role of the PNP in the context of the research protocol, the nurse-patient interaction, and the relationship of the PNP with other health-care professionals. The authors are research associates involved in a long-term prospective study of indications for tonsillectomy and adenoidectomy (T&A) at the Children's Hospital of Pittsburgh.

The primary responsibility of the PNP in the T&A Study is to carry out the day-to-day clinical protocol. Initially, the PNP reviews information that is submitted by referring health professionals in order to determine eligibility for enrollment into the study. Children who meet the criteria undergo an extensive initial evaluation including comprehensive history, examination of ear, nose, throat, and chest, and a battery of diagnostic studies. Pediatricians and otolaryngologists who are members of the study team examine the patient at the initial visit, and the pediatrician reexamines the child at least every six months thereafter. Follow-up visits with the PNP are scheduled at six-week intervals and whenever an otolaryngologic illness is suspected. At each visit, the PNP reviews the patient's course since entry into the study, evaluates his current status, including how this fits into the overall study framework, and, within certain limits, undertakes management according to study protocol. Pediatricians and otolaryngologists are always available for consultation, and one or more physicians involved in the study evaluate children who are found or suspected to have illness of more than a mild degree. Whenever surgical decisions are considered, the PNP organizes and presents the relevant data for joint review by a pediatrician and an otolaryngologist. The members of the study team then evaluate the patient and together decide whether protocol criteria for surgery have been met.

Interobserver reliability in the study is ensured by the utilization of standardized systems for quantifying, rating, and recording observations. Independent findings by two or more examiners at any one visit are systemically compared and analyzed, thus maintaining consistency and replicability of findings.

Genuine case and consideration of the patient is as important in clinical research as it is in any other area of nursing practice. The roles of the PNP as listener, health educator, and patient advocate in no way interfere with the duties of managing the study protocol. On the contrary, the study runs more smoothly when there is a strong nurse-patient relationship. The parents are more motivated to provide accurate histories, the child cooperates more fully in physical examinations and other procedures, and there are fewer missed appointments. A recent review of the clinic "no show" rate found it to be only 12 per cent. As rapport develops between the PNP and her patients, she is often the first to learn of the general medical and psychosocial concerns of the families. Ear, nose, and throat (ENT) problems as

well as routine health and developmental issues may be discussed during clinic or telephone consultations. Families are encouraged to maintain close ties with their primary health care provider and are referred to this caretaker or to an appropriate special facility if problems unrelated to the T&A study arise.

Hospitalization and surgery are often threatening experiences for children and their families. For children scheduled to have a tonsillectomy or adenoidectomy, anticipatory guidance concerning hospitalization is important. To help families to develop realistic expectations regarding the hospital experience, the PNP describes hospital routines and surgical procedures and explains postoperative care both in hospital and at home. Visits by the PNP during hospitalization provide an opportunity for the family to discuss feelings and ask questions, and for the PNP to reinforce postoperative instructions.

A collaborative relationship among the members of the research team is critical to the progress of a large clinical research project. Regular staff meetings provide opportunities for open discussion of clinical or administrative issues affecting the project. For example, if there are unanticipated problems with routine procedures or standardized working definitions, the staff works together to arrive at solutions to the problems. In managing the care of the patients, the PNP in the T&A Study also collaborates with a variety of health care professionals apart from the research team. Community pediatricians and physicians, school nurses, audiologists, speech pathologists, allergists, hospital house officers, social workers, and hospital staff nurses may all be involved in the care of the study patient at some time. This type of collaborative relationship among professionals results in a reciprocal learning experience. The PNP also functions as a clinical instructor for medical students and PNP students, who are regularly assigned to the T&A Clinic as part of their formal education. These students learn about the clinical and research issues involved as well as about pneumatic otoscopy and other examination skills.

Participating in and helping to plan the conduct of a clinical research project that involves direct patient care is not only challenging, but also requires dedication to the principles of quality health care. The authors find this setting highly favorable for both facilitating mutually satisfying nurse-patient relationships and providing opportunities for counseling, teaching, and learning.