

Family presence during resuscitation and invasive procedures

Issue

In most cases, the family is the patient's primary support system. Family members are frequently not given the opportunity to remain with the patient during invasive procedures, including resuscitation efforts. Families and patients may be separated for reasons such as the perception of being overwhelmed and/or intimidated with the situation and concern on the part of the individuals performing the procedure in the presence of non-medically oriented individuals.

NENA position

NENA supports the option of family presence during invasive procedures and/or resuscitation efforts.

NENA acknowledges that a support system, (i.e.) social worker and/or pastoral care, must be in place for the family member(s) during invasive procedures and/or resuscitation efforts.

NENA supports further research related to the presence of family members during invasive procedures and/or resuscitation and the impact it has on family members, patients, and health care professionals.


Rationale

Every emergency patient is a member of a family system with the family being defined as a person(s) who has an established mutual relationship with the patient.

The family system is the major source of support for the

individual during times of stress and crisis. Studies have indicated that the most important needs identified by family members of critically ill patients are:

- To be with the patient
- To be helpful to the patient
- To be informed of the patient's condition
- To be comforted and supported by family
- To be accepted, comforted, and supported by health care personnel
- To feel that the patient was receiving the best possible care

Family presence during resuscitation efforts allows the patient and the family to support each other and facilitate the grieving process by bringing a sense of reality to the treatment efforts and the patient's clinical status. 

References

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