

Family Presence During Resuscitation

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Political Map of the World



Serbia and Montenegro have asserted the formation of a joint independent state, but this entity has not been formally recognized as a state by the United States.

Boundary representation is not necessarily authoritative.

Disclosure...



THE UNBRANDED DOCTOR

<http://npalliance.org/action/the-unbranded-doctor/>

Beginning with the end in mind ...

- What dose Literature tell us?
 - Do family need to be present during resuscitation?
 - Do they want to be present?
 - Do we want them to be present?
- What dose Turkish people Think?
 - Health care workers
 - Patients and families
- What dose Arab and Emirati think?

Literature:

Do family need to be present during resuscitation?

Literature: Do family need to be present during resuscitation?

The NEW ENGLAND JOURNAL *of* MEDICINE

ORIGINAL ARTICLE

Family Presence during Cardiopulmonary Resuscitation

Patricia Jabre, M.D., Ph.D., Vanessa Belpomme, M.D., Elie Azoulay, M.D., Ph.D.,

N ENGL J MED 368;11 NEJM.ORG MARCH 14, 2013

Literature: Do family need to be present during resuscitation?

- Methods:
 - RCT
 - Family present during CPR x Standard
 - About 200 in each group (ITT)
 - Primary Outcome: PTSD in 90 days
 - Secondary Outcome: Anxiety/ Depression/ Effect on Staff/ Resuscitation
 - The Impact of Event Scale (IES) to assess for PTSD
 - Hospital Anxiety and Depression Scale (HADS)

Literature: Do family need to be present during resuscitation?

- Result:

Table 3. Psychological Assessment of Family Members Enrolled in the Study at 90 Days (Observed-Cases Population).*

Variable	Intervention Group (N=233)	Control Group (N=242)	P Value†	Family Member Present (N=289)	Family Member Absent (N=186)	P Value†
IES score — median (interquartile range)‡	22 (12–33)	24 (13–35)	0.26	21 (11–32)	26 (15–36)	0.007
Presence of PTSD-related symptoms — no. (%)§	64 (27)	90 (37)	0.01	78 (27)	76 (41)	0.01
HADS score — median (interquartile range)¶	10 (6–16)	11 (6–19)	0.44	9 (5–16)	12 (7–19)	0.02
Symptoms of anxiety — no./total no. (%)	34/230 (15)	55/239 (23)	<0.001	46/287 (16)	43/182 (24)	<0.001
Symptoms of depression — no./total no. (%)	39/230 (17)	50/239 (21)	0.13	42/287 (15)	47/182 (26)	0.009
Saw a psychologist after resuscitation of the patient — no./total no. (%)	20/232 (9)	18/242 (7)	0.83	25/289 (9)	13/185 (7)	0.23
Received newly prescribed psychotropic drugs after resuscitation of the patient — no./total no. (%)	64/230 (28)	77/238 (32)	0.22	72/287 (25)	69/181 (38)	<0.001
Made a suicide attempt after resuscitation of the patient — no./total no. (%)	2/227 (1)	3/238 (1)	—	5/285 (2)	0/180	—

Literature:

Do they want to be present?



THANK YOU NURSES!

Literature: Do they want to be present?



Clinical Practice Guideline: Family Presence During Invasive Procedures and Resuscitation

Does family presence have a positive or negative influence on the patient, family, and staff during invasive procedures and resuscitation?

Developed by the 2009 ENA Emergency Nursing Resources Development Committee

Revised by the 2012 ENA Emergency Nursing Resources Development Committee:

Literature: Do they want to be present?

- Most want to be present
 - Their right
 - Decreased level of distress
 - Increased satisfaction
 - Everything that could have been done for their family member had been done
 - It helped them cope with the death of their child

Literature:

Do we want them to be present?

Literature: Do we want them to be present?

Families in Critical Care



ATTITUDES TOWARD AND BELIEFS ABOUT FAMILY PRESENCE: A SURVEY OF HEALTHCARE PROVIDERS, PATIENTS' FAMILIES, AND PATIENTS

By Christine R. Duran, APRN-BC, DNP, CNS, CCIN, Kathleen S. Oman, RN,

Literature: Do we want them to be present?

- 202 clinicians
- Clinicians had positive attitudes
- And had concerns about:
 - Safety
 - The emotional responses of the family members
 - Performance anxiety.
- Nurses had more favorable attitudes

Literature: Do we want them to be present?

-



Contents lists available at [ScienceDirect](#)

Resuscitation

journal homepage: www.elsevier.com/locate/resuscitation

Letter to the Editor

Attitudes of emergency medicine physicians
towards family presence during resuscitation



the demographic
relation to the
The response

Literature: Do we want family to be present?

- Survey of 277 Iranian EM physicians:
 - Lack of believe on matter
 - No incentive
 - treatment will be compromised
 - Legal implications
 - Lack of authoritative support

Literature: Do we want family to be present?

•



The screenshot displays the ACEP website's 'Clinical & Practice Management' section. The header includes the ACEP logo, navigation links (Home, News Media, Contact Us, About Us), and a search bar. The main navigation bar lists various categories: Clinical & Practice Management, Continuing Education, Professional Development, Meetings & Events, Advocacy, Membership, and Bookstore. The current page path is 'Clinical & Practice Management » ACEP Policy Statements'. A large banner image shows a hand holding a stethoscope. Below the banner, a sidebar on the left lists 'Clinical & Practice Management' with sub-links: Clinical Policies, Policy Statements (selected), and Residency Programs. The main content area features the title 'Patient- and Family-Centered Care and the Role of the Emergency Physician Providing Care to a Child in the Emergency Department'. A 'Related Links' sidebar on the right lists 'Policy Statements' with sub-links: 'Appropriate and Safe Utilization of Helicopter Emergency Medical Services' and 'Definition of Clinical Ultrasonography'.

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Clinical & Practice Management » ACEP Policy Statements

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Clinical & Practice Management

Clinical & Practice Management

- Clinical Policies
- Policy Statements**
- Residency Programs

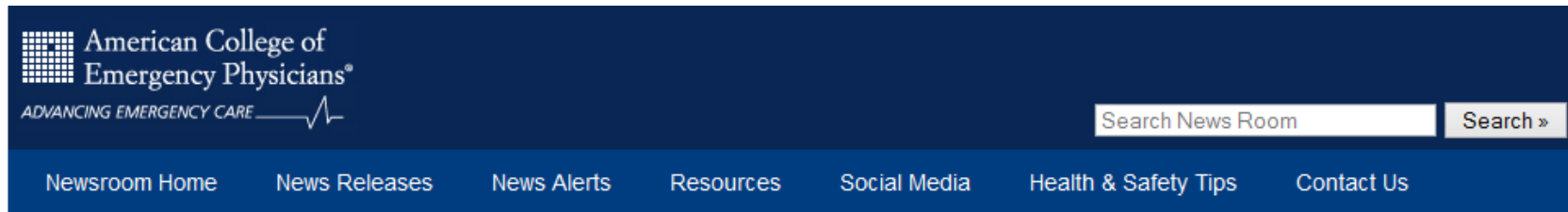
Patient- and Family-Centered Care and the Role of the Emergency Physician Providing Care to a Child in the Emergency Department

Related Links

Policy Statements

- » Appropriate and Safe Utilization of Helicopter Emergency Medical Services
- » Definition of Clinical Ultrasonography

Literature: Do we want them to be present?



[Resources](#) > [Fact Sheets](#)

Family Presence Fact Sheet

Main Points

- Providing the best care for patients is the primary goal of emergency physicians and nurses.
- The option of family member presence should be encouraged for all aspects of emergency care.ⁱ
- Family presence should never be forced on a family or the emergency staff. Hospital policy determines whether or not a family member can be present during a medical procedure.
- Relatives who remain with loved ones who are in critical condition often express appreciation for the efforts of emergency teams; because they understand that truly dedicated efforts were made.
- Emergency physicians save lives every day. We are experts in adult and pediatric emergencies.

Literature: Do we want them to be present?

Table 2. Characteristics and Outcome of Advanced Resuscitation According to the Presence or Absence of a Family Member.

Characteristic or Outcome	Family Member Present (N=342)	Family Member Absent (N=228)	P Value
Resuscitation procedure			
Duration of advanced resuscitation — min			0.58
Median	30	30	
Interquartile range	23–40	20–40	
No. of shocks delivered — median (interquartile range)	3 (1–5)	4 (1–6)	0.56
Epinephrine administration — mg			0.86
Median	7	7	
Interquartile range	5–10	5–10	
Additional drugs administered — no. (%)			
Amiodarone	44 (13)	29 (13)	0.96
Fibrinolytic drug	7 (2)	10 (4)	0.11
Lidocaine	0	1 (0)	0.40
Sodium bicarbonate	21 (6)	10 (4)	0.37
Other	26 (8)	13 (6)	0.38
Survival			
Return of spontaneous circulation — no. (%)	94 (27)	58 (25)	0.59
Survival to hospital admission — no. (%)	63 (18)	36 (16)	0.42
Survival to day 28 — no. (%)	11 (3)	9 (4)	0.64

Beginning with the end in mind ...

- What dose Literature tell us?
 - Do family need to be present during resuscitation?
 - Do they want to be present?
 - Do we want them to be present?
- What dose Turkish people Think?
 - Health care workers
 - Patients and families
- What dose Arab and Emirati think?

What dose Turkish people think?

Health care workers

Original Investigation / *Özgün Araştırma*

Opinions for Family Presence During Cardiopulmonary Resuscitation in Turkey: A Literature Review

*Türkiye'de Kardiyopulmoner Resüsitasyon Sırasında Ailenin
Bulunmasına İlişkin Görüşler: Bir Literatür İncelemesi*

Meryem Yavuz¹, Burcu Totur Dikmen², Yasemin Altınbaş¹, Arzu Aslan¹, Ükke Karabacak³

What dose Turkish people think?

Health care workers

Table 3. Analysis of studies related to family presence during cardiopulmonary resuscitation in Turkey (studies presented in chronological order)

Author/year	Study design	Sample	Method	Results	Conclusions	Limitations
Bade A and Septil I, 2005 (27)	A descriptive study	Seven public hospitals and three university hospitals, 409 critical care nurses, in Istanbul.	Data was collected with a questionnaire developed by Fulbrook et al. The questionnaire consisted of 43 items within 3 areas of inquiry. Areas of inquiry included in this survey were; (1) personal information about the nurses; (2) their experiences with regard to family presence at cardiopulmonary resuscitation (3) and their opinions on family witnessed cardiopulmonary resuscitation.	A majority of the nurses did not agree that it was necessary for family members to be with their patient and did not want family members in the resuscitation room. In addition, most of the nurses were concerned about the violation of patient confidentiality had concerns that untrained family members would not understand cardiopulmonary resuscitation treatments, would consider them offensive and therefore argue with the resuscitation team. The nurses expressed their concern that witnessing resuscitation would have long-lasting adverse emotional effects on the family members.	This study reveals that critical care nurses in Turkey are not familiar with the concept of family presence during cardiopulmonary resuscitation. In view of the increasing evidence from international studies about the value of family presence during cardiopulmonary resuscitation, the study recommended an educational programme about this issue and policy changes within hospitals to enhance critical care in Turkey.	This study was limited to 409 critical care nurses and 10 hospitals in Istanbul.
Yenturli S et al., 2005 (28)	A descriptive study	19 university hospitals, 226 physicians, in Izmir	Data were collected with a questionnaire. The questionnaire consisted of three pages. The first page was informational this section included the objectives of the study and an introduction to family presence at resuscitation. The following pages combined the survey questions.	Most of the participants (82.0%) did not endorse family member presence during resuscitations. Sixty percent of participants indicated that they were familiar with family witnesses during resuscitation and 37% stated that they had been involved in a resuscitation during which family members were present. Seventy-eight percent of the participants indicated that family members were never allowed to view resuscitations, 21% stated that family members were occasionally allowed, but only 1% of participants stated that they were routinely allowed.	Many emergency physicians have no knowledge of family presence resuscitation and do not support the practice. Emergency physicians are more likely to favour family witnesses as they learn more about and gain more experience with family presence resuscitation.	The limitation of this study was the inclusion of only participants in the emergency department.
Demir E 2008 (21)	A descriptive study	One university hospital, 62 physicians and 62 nurses who worked in an emergency department or in cardiology or anaesthesia intensive care units, in Izmir.	Data were collected with a questionnaire. The survey questionnaire was developed by the researcher. There were four open-ended questions and 17 multiple choices.	Of health professionals, 62.6% did not think it was appropriate for patients' families to be present during cardiopulmonary resuscitation. The most common concerns were that the family would interfere with the team's activities (56.7%) and that resuscitation is a very traumatic procedure (43.6%).	Policies need to be developed regarding this topic because the absence of policy can cause misunderstandings and differences in practice. Further research is required to determine what public education is needed to facilitate the implementation of such policies.	This study was done in only one hospital and the participants were working in the different departments.
Ercay G et al., 2008 (23)	A descriptive study	One university hospital, 420 family members, in Izmir.	Data were collected using a structured face-to-face interview with the participants. The interview consisted of two sections. In the first section, the objectives of the interview were explained to the participants. In the second section, participants' demographic information was requested.	Most participants (86.4%) stated that they would like to be present during resuscitation.	Data locally revealed that most of the participants in this survey would like to be present at cardiopulmonary resuscitation conducted on family members who presented at the emergency department. Factors such as the sex of the observer and absence of health insurance of the patient affected the level of willingness to observe cardiopulmonary resuscitation.	This study was conducted at only one centre in Izmir. The results may not be generalized.
Güneş OY and Zaybek A, 2008 (12)	A descriptive study	Two university hospitals, 135 critical care nurses, in Izmir.	Questionnaire consisted of 43 items under three areas of inquiry. Section 1 comprised socio demographic characteristics, including age, area of practice and years of experience in nursing and clinical specialty. Section 2 examined the nurses' experiences of family presence during resuscitation. It consisted of six closed-ended questions using yes and no answers. Section 3 examined the critical care nurses' attitudes to family presence with respect to: (1) decisions about resuscitation, (2) processes of resuscitation and (3) outcomes of resuscitation. Responses to statements in this section were on a three-point Likert scale (agree, do not know, disagree).	Of the nurses, only 22.2% had experienced a situation where family members were present during cardiopulmonary resuscitation. Most of these nurses (n = 20) had one or more negative experiences. The majority disagreed that family members should always be offered the opportunity to be with the patient during cardiopulmonary resuscitation. The most common reasons for not favouring family presence at resuscitations were reported as performance anxiety fear of causing psychological trauma to family members and increased risk of litigation.	Many critical care nurses have no knowledge of family presence resuscitation and do not support the practice. It is suggested that Turkish critical care nurses should be informed by the international literature about the concept of family presence in resuscitation and that culturally appropriate policies concerning this subject should be developed in Turkish hospitals.	The sample was two university hospitals and 135 staff, which cannot be generalized to all the population.
General Limitations: All studies have the kinds of limitations that are relevant to questionnaire and descriptive studies. All of them have a restricted population and sample, and involve limited hospitals and staff. Most of population in Turkey are Muslims, mostly are women, which affects ideas about family presence during cardiopulmonary resuscitation. These studies give an idea about this topic, but cannot be generalized all of the Turkish population.						

Most
(80%)
said
No

What dose Turkish people think?

Patients and Families

Original Article
Özgün Araştırma

THE JOURNAL OF ACADEMIC
EMERGENCY MEDICINE

61

Evaluation of Patients' Families' Attitudes to Witnessing Invasive Procedures in the Emergency Department

Hasta Yakınlarının Acil Serviste Yapılan Girişimsel Uygulamalar Sırasında Hastalarının Yanında Bulunabilme İsteği ile İlgili Görüşlerinin Değerlendirilmesi

What dose Turkish people think?

Patients and Families

Table 2. Views of patients' family members on being present by the patients' side during interventions

	n	%*
Would you want to be by the patient's side during invasive interventions?		
Yes	346	76.2
No	108	23.8
Do you think being present by the patient's side could prevent physicians from performing their duties effectively?		
Yes	302	66.5
No	152	33.5
*Percentages are the percentage of colon		

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- What dose Arab and Emirati think?



What dose Arab and Emirati thinks?

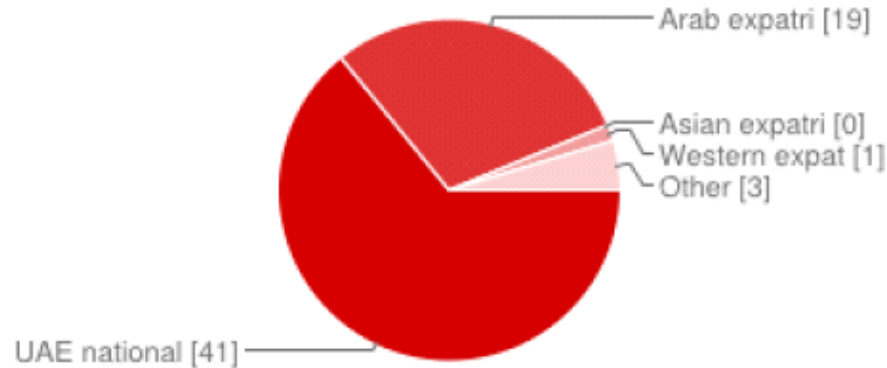
- **UAE Arab population perception of family presence during resuscitation**
 - Survey based study
 - 2000 responses to reflect 6 million population with 5% margin of error
 - Twitter, email data base of Emirates Medical Association Mini Medical School, Data base of Tabeeby
 - 6 questions

What dose Arab and Emirati thinks?

- Have you ever witnessed / attended family or friend needing Cardio-pulmonary Resuscitation (CPR)?
- Did your family member survive the resuscitation and left the hospital alive?
- Was it good experience to be present when your family member or friend was being resuscitated?
- Could you explain how it was beneficial for you ?
- If you have the same situation later, will you attend the CPR?
- If one of your family members need a CPR, will you attend the procedure?

What dose Arab and Emirati thinks?

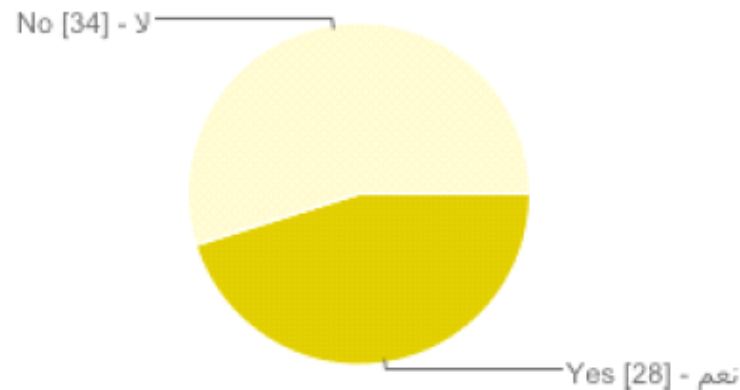
What is your nationality ?



الإمارات دولة مواطني - UAE national	41	64%
العرب المقيمون - Arab expatriate	19	30%
الدول من المقيمون - Asian expatriate الآسيوية	0	0%
الدول من المقيمون - Western expatriate الغربية	1	2%
Other	3	5%

What dose Arab and Emirati thinks?

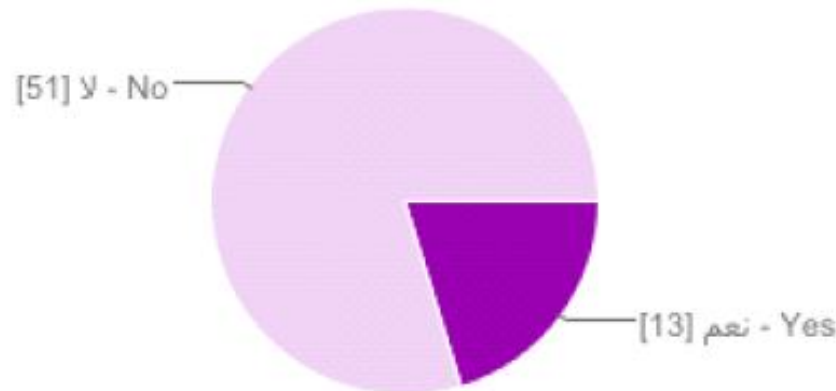
Did your family member survive the resuscitation?



نعم - Yes	28	45%
لا - No	34	55%

What dose Arab and Emirati thinks?

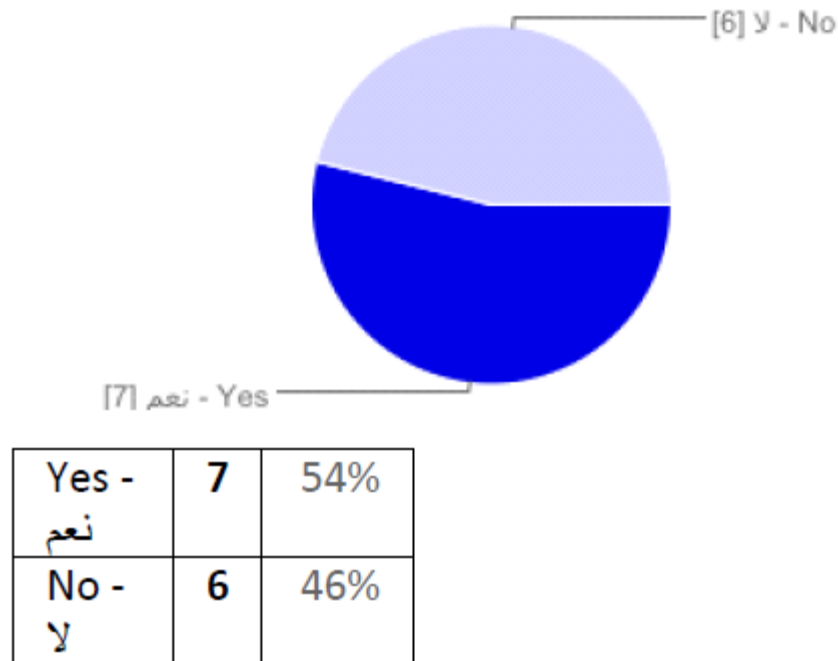
- Have you ever witnessed / attended family or friend needing Cardio-pulmonary Resuscitation (CPR)?



Yes - نعم	13	20%
No - لا	51	80%

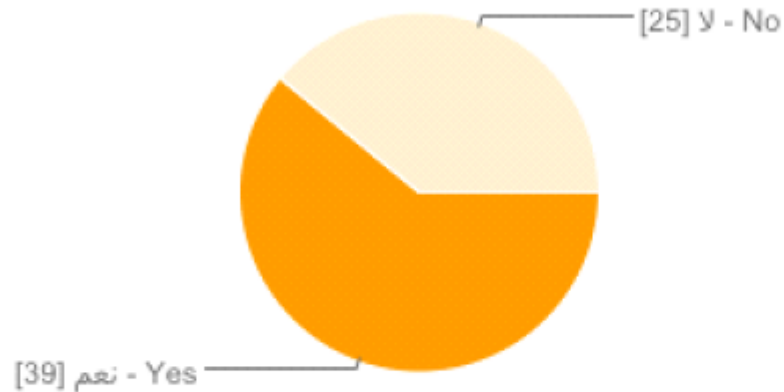
What dose Arab and Emirati thinks?

Was it a good experience?



What dose Arab and Emirati thinks?

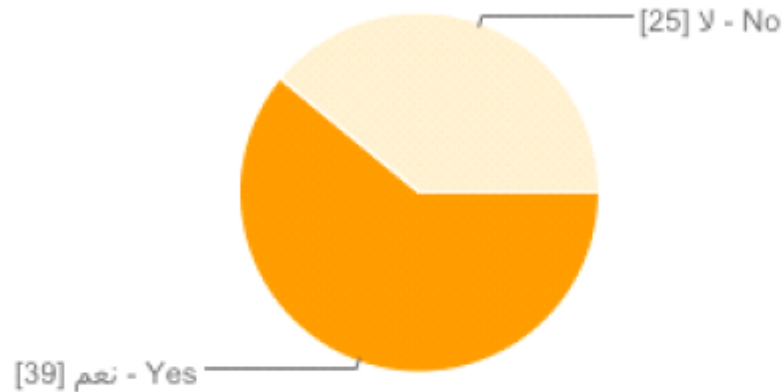
If you have the same situation later, will you attend the CPR ?



Yes - نعم	39	61%
No - لا	25	39%

What dose Arab and Emirati thinks?

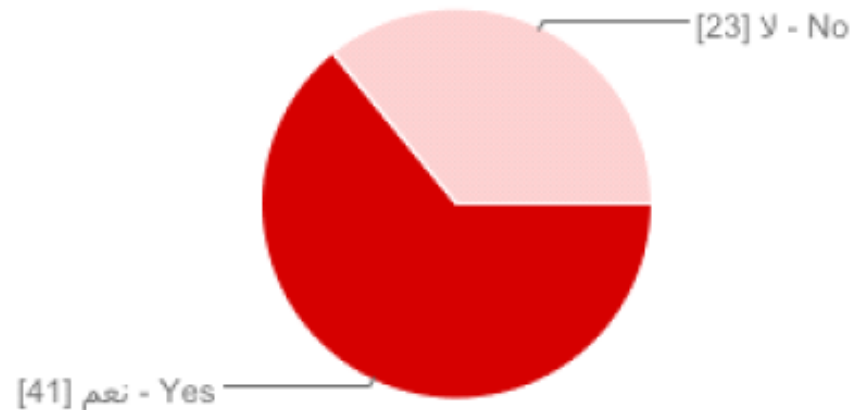
If you have the same situation later, will you attend the CPR ?



Yes - نعم	39	61%
No - لا	25	39%

What dose Arab and Emirati thinks?

- If one of your family members need a CPR, will you attend the procedure ?



Yes - نعم	41	64%
No - لا	23	36%

What dose Arab and Emirati thinks?

A	B	C	D	E	F	G	H	I	J	K
What is your educational background ?	What is your age group ?	Emirate of residence ?	What is your nationality ?	Have you ever witnessed / attended family or friend needing Cardiac	Was it good experience to be present when your family member or friend	Could you explain how it was beneficial for you ?	If you have the same situation later, will you attend the CPR ?	Why ?	If one of your family members need a CPR, will you attend the procedure ?	Did your family member survive the resuscitation and left the hospital alive?
Master - ماجستير	25 - 30 years old 30 - 25 بين سنة	Dubai - دبي	Arab expatriate - المقيمون العرب	Yes - نعم	Yes - نعم		Yes - نعم		Yes - نعم	
Master - ماجستير	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	Yes - نعم	Yes - نعم	---	Yes - نعم	---	Yes - نعم	
High - الثانوية العامة	Younger than 25	Abu Dhabi - أبوظبي	UAE national -	No - لا			Yes - نعم	للتأكد من أنهم يفعلون كل	Yes - نعم	No - لا
Bachelor - بكالوريوس	Younger than 25	Abu Dhabi - أبوظبي	UAE national -	No - لا			No - لا	The situation is life	No - لا	Yes - نعم
Bachelor - بكالوريوس	Younger than 25	Abu Dhabi - أبوظبي	UAE national -	Yes - نعم	No - لا	My grandma	Yes - نعم	I should be close	Yes - نعم	No - لا
Bachelor - بكالوريوس	Older than 35	Abu Dhabi - أبوظبي	UAE national -	No - لا			Yes - نعم	لكي أطمئن وأتأكد ماذا	Yes - نعم	No - لا
High - الثانوية العامة	25 - 30 years old	Abu Dhabi - أبوظبي	Arab expatriate -	No - لا			Yes - نعم	لكي أساعدهم بما اني	Yes - نعم	No - لا
Academic - اعدادي	Older than 35	Abu Dhabi - أبوظبي	UAE national -	Yes - نعم	No - لا	لأنه كان في المستشفى وقد	Yes - نعم	لأنه ربما يكون وجودي	Yes - نعم	Yes - نعم
Bachelor - بكالوريوس	31 - 35 years old	Abu Dhabi - أبوظبي	Arab expatriate -	No - لا			Yes - نعم	افضل التواجد لانني ساكون	Yes - نعم	No - لا
Bachelor - بكالوريوس	31 - 35 years old	Dubai - دبي	UAE national -	Yes - نعم	Yes - نعم	اكتساب المعرفة الضرورية	Yes - نعم	لزيادة الوعي والتكيف	Yes - نعم	No - لا
PhD - دكتوراه	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا			Yes - نعم	T	Yes - نعم	No - لا
High - الثانوية العامة	31 - 35 years old	Abu Dhabi - أبوظبي	Arab expatriate -	No - لا			Yes - نعم	أكون مطمئن أكثر	Yes - نعم	Yes - نعم
High - الثانوية العامة	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا			Yes - نعم	لاني احب التعلم الشيء	Yes - نعم	No - لا
Master - ماجستير	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا			Yes - نعم	لكي اساعد اذا احتاج الامر	Yes - نعم	No - لا
Bachelor - بكالوريوس	Older than 35	Ras Al Khaimah -	UAE national -	No - لا		لم اكن في موقف يستدعي	Yes - نعم	مساعدة الحياة الانسانية	Yes - نعم	Yes - نعم
Bachelor - بكالوريوس	Younger than 25	Abu Dhabi - أبوظبي	UAE national -	No - لا		It may support the	Yes - نعم	It's a very	Yes - نعم	Yes - نعم
Master - ماجستير	25 - 30 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا		Did not attend CPR	Yes - نعم	To help	Yes - نعم	No - لا
Bachelor - بكالوريوس	Younger than 25	Abu Dhabi - أبوظبي	UAE national -	No - لا		*	No - لا	*	Yes - نعم	No - لا
Bachelor - بكالوريوس	Younger than 25	Sharjah - الشارقة	UAE national -	No - لا			Yes - نعم	I want to learn and	Yes - نعم	No - لا
Bachelor - بكالوريوس	Older than 35	Abu Dhabi - أبوظبي	UAE national -	No - لا		لم احضر قط	Yes - نعم	نعم حتى اطمئن	Yes - نعم	No - لا
Bachelor - بكالوريوس	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا		No	Yes - نعم	To learn	Yes - نعم	No - لا
Master - ماجستير	31 - 35 years old	Abu Dhabi - أبوظبي	UAE national -	No - لا		لا يوجد	Yes - نعم	للتعلم	Yes - نعم	Yes - نعم
Academic - اعدادي	Older than 35	Abu Dhabi - أبوظبي	UAE national -	No - لا		كنا بالمستشفى ولايسمح اننا	Yes - نعم	لاننا ربما يكون لوجودي	Yes - نعم	Yes - نعم

The Secular believe...

Paper

J R Coll Physicians Edinb 2010; 40:4-8
doi:10.4997/JRCPE.2010.102
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CLINICAL

The attitudes of team members towards family presence during hospital-based CPR: a study based in the Muslim setting of four Iranian teaching hospitals

¹N Kianmehr, ²M Mofidi, ³H Rahmani, ⁴Y Shahin

¹Assistant Professor of Internal Medicine; ²Assistant Professor of Emergency Medicine; ^{3,4}Medical Student, Iran University of Medical Sciences, Tehran, Iran

77 % of 200 said No

What dose Arab and Emirati thinks?

CRITICAL CARE NURSES' PERCEPTIONS OF FAMILY WITNESSED RESUSCITATION IN THE KINGDOM OF SAUDI ARABIA

J. de Beer, MA Heath Studies
University of KwaZulu-Natal

M.M. Moleki, DLitt et Phil
University of South Africa
Department of Health Studies
Corresponding author: molekmm@unisa.ac.za

90% said no

Beginning with the end in mind ...

- Do family need to be present during resuscitation?
 - **Yes they do**
- Do they want to be present?
 - **Yes they do**
- Do we want them to be present?
 - **No , but we have to change to yes**
- What dose Turkish people Think?
- What dose Arab and Emirati think?
 - Cultural and secular believes diversity may have no influence on this matter

Save the Date

5 - 9 December 2014

www.esem2014.com

