Incorporating a Nausea Assessment Tool into Nursing Practice on an Oncology Unit
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Background
Nausea and vomiting are two of the most common side effects of chemotherapy that negatively impact quality of life. Nausea, similarly to pain, is a subjective symptom that is difficult to measure and often goes undertreated in the pediatric population until emesis occurs.

Nurses of different experience levels assess and treat nausea differently, therefore using a standardized assessment tool can help develop algorithms for managing nausea and vomiting in the pediatric oncology patient.

In an attempt to improve treatment of nausea on the oncology unit a thorough review of literature was completed to evaluate nausea assessment tools. The Baxter Retching Faces Scale (BARF) is a validated pictorial nausea assessment tool designed for pediatrics and was the tool chosen for a feasibility project on the oncology unit.

Methods
To assess the usefulness of the BARF scale a feasibility project was implemented on 6 Northeast. The goal of the study was to determine the usefulness of the BARF scale in nursing practice for assessing and treating nausea.

The feasibility project consisted of 20 patients between the ages 7-18 years old receiving emetogenic chemotherapy. A BARF scale form and data collection sheet were left at the patient’s bedside and the nurse was required to assess nausea every 4 hours and as needed. The nurse would document the nausea score, any interventions, and number of episodes of emesis on the data collection sheet.

To educate the staff on the BARF scale a.net learning module was created and the “train the trainer” education technique was utilized.

Pictorial Nausea Assessment Tool

Baxter Retching Faces Scale

BARF Scale (Baxter 2011)

Instructions for use of nausea scale
1. Please circle the face that you assessed a nausea score and document score.
   Minimum recommendation is a figure white scale
2. Please list treatments given, if any. Follow up with a repeat score within 2 hours
3. Note time and duration of any emesis (number of episodes)
4. When patient is discharged, the form should be returned to Donn Corr’s mail box and not written down in medical records

<table>
<thead>
<tr>
<th>Score</th>
<th>Nausea Score</th>
<th>Treatment Type</th>
<th>Nausea</th>
<th>Note</th>
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<tbody>
<tr>
<td>0-1</td>
<td>0-1</td>
<td>Light</td>
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<td></td>
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<tr>
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<td>Moderate</td>
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<tr>
<td>4</td>
<td>4-5</td>
<td>Severe</td>
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<tr>
<td>5</td>
<td>5</td>
<td>Severe</td>
<td></td>
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</tr>
</tbody>
</table>

Survey Comments
- “If adopted, would be great to have in Powerchart (rather than paper)”
- “Will need a copy at each bedside or on our badges”
- “Maybe we could have a small card made, similar to FACES scale for our badge to have it available to ask patients”

Next Steps
The BARF scale is a useful tool for assessing nausea and is easily incorporating into nursing practice as shown by the results of the survey. Next steps include working with the hospital to add the BARF scale to Power Chart, creating a BARF scale card for nursing badges, and eventually using the scale to help develop algorithms for improving management of nausea/vomiting.