Experience of the patients who were being mechanically ventilated in the Intensive Care Unit

A Descriptive phenomenological Study

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Introduction: Patients treated in an intensive care units are greeted by an environment of technical equipment, where hoses and wires are connected to different surveillance monitors. Patients who are unable to maintain adequate oxygenation of the tissue supplied with an endotracheal tube which is connected to a mechanical ventilator. To accept the endotracheal tube and treatment, patients are given sedation and analgesics. In intensive care the nurse has a central role in the treatment and nursing care- More research is needed to improve patients experience in the intensive care unit and promote recovery.

Aim of this study was to describe the intensive care unit experiences of patients undergoing mechanical ventilation.

Method: A descriptive phenomenological design, semi structured interviews were conducted during 2013 with eight people who were mechanically ventilated in an intensive care unit for more than 48 hours in the northern and central part of West Bank. Interview transcripts were analyzed using Giorgi’s phenomenological analysis

Findings: Twelve themes and 26 sub-themes emerged: Being versus not
being informed, physical discomfort, psychological discomfort, safety in the ICU, feel vulnerable and dependent, the technological environment around the patient, the nurse's attitudes, struggling to be able to communicate, relatives significant, memories and perception of time varied and regain control.

**Conclusion:** Being dependent for survival on other people and technical medical equipment created a sense of being vulnerable in an anxious situation and a feeling of uncertainty about one’s own capacity to breathe. Having lines and tubes in one’s body was stressful. As the people being mechanically ventilated could not trust their body to function.

**Keywords:** Intensive care unit; mechanical ventilation; phenomenology