

Trauma Research

The process of studying suffering, enduring and comforting led to a number of observational studies in the trauma room in 3 hospitals in North America. 174 trauma resuscitations were videotaped and analyzed. The following articles on the care of the trauma patient were published:

Morse, J. M. & Pooler, C. (2002). Patient-family-nurse interactions in the trauma-resuscitation room. *American Journal of Critical Care, 11(3), 240-249.*

Morse, J. M., Penrod, J., Kassab, C., & Dellasega, C. (2000) Evaluating the efficiency and effectiveness of approaches to nasogastric tube insertion during trauma care. *American Journal of Critical Care, 9(5) 325-333.* [Commentary written as Guest Editorial by N. Metheny, *AJCC, 9(5), 2000, p 303-306*; A. McDonald, www.webrn.com article 618]

Penrod, J., Morse, J. M., & Wilson, S. (1999). Comforting strategies used during nasogastric tube insertion. *Journal of Clinical Nursing, 8, 31-38.* Summary and commentary printed as: Dean, H.R. (1999). A blend of comforting strategies and a form of team comforting were used during nasogastric tube insertion. *Evidence Based Nursing, 2(4),134.*

Morse, J. M. (2000). Responding to the cues of suffering. *Health Care for Women International, 21, 1-9.*

Morse, J. M., & Proctor, A. (1998). Maintaining patient endurance: The comfort work of trauma nurses. *Clinical Nursing Research, 7(3), 250-274.*

Morse, J. M., & Mitcham, C. (1998). The experience of agonizing pain and signals of disembodiment. *Journal of Psychosomatic Research, 44(6) 667-680.*

Morse, J. M. (1997) Responding to threats to integrity of self. *Advances in Nursing Science, 19(4), 21-36.*

Proctor, A., Morse, J. M., & Khonsari, E. S. (1996). Sounds of comfort in the trauma center: How nurses talk to patients in pain. *Social Sciences & Medicine, 42, 1669-1680.*