SUGGESTED GUIDELINES FOR REGISTERED NURSES IN THE MANAGEMENT OF ANALGESIA BY CATHETER

Definition

Use of epidural, intrathecal, intrapleural or peripheral nerve catheter is to achieve analgesia in patients with acute or chronic pain or women in labor.

Management and Monitoring

It is within the scope of practice of the Registered Nurse to manage the care of patients receiving analgesia by catheter provided the following criteria are met:

1. A certified registered nurse anesthetist who holds a license as an APRN, or a licensed physician, places the catheter or infusion device and ascertains that it is correctly located and administers the test-dose or initial dose.

2. Guidelines for patient monitoring, drug administration, site care, and managing complications or emergency situations are available and reflect accepted national standards of professional nursing practice and the most recent research and technological advances.

3. A registered nurse may manage the care of patients with catheters or devices for analgesia to alleviate pain. Management includes: monitoring of the mother and fetus, reinjection of medication following establishment of therapeutic range, adjustment of drug infusion rate in accordance with written orders, site care, stopping the infusion and removal of the catheter when ordered by a certified registered nurse anesthetist who holds a license as an APRN or a licensed physician.

4. When a women in labor is receiving epidural analgesia a certified registered nurse anesthetist who holds a license as an APRN, or licensed physician who is an anesthesiologist, must be immediately available on-site.

5. The registered nurse managing the care of patients receiving analgesia by catheter or infusion device for acute or chronic pain relief or for the women during labor is able to:
   a. Demonstrate the knowledge and skills necessary to manage the care of patients receiving analgesia by catheter or mechanical infusion devices.
   b. Assess the patient's total care needs and initiate nursing interventions to insure optimal patient care during analgesia.
   c. Demonstrate the knowledge and skills to assess, diagnose, and intervene in the event of complications or undesired outcomes and to institute nursing interventions in accordance with institutional protocols.
   d. Anticipate and recognize potential complications of the analgesia in relationship to the type of catheter/infusion device and medication being utilized.
   e. Recognize emergency situations and institute nursing interventions in compliance with the anesthesia provider's or attending licensed physician's guidelines and orders.
   f. Demonstrate knowledge and skills required for catheter removal.

6. The registered nurse has completed a competency validation of the knowledge, skills, and abilities related to the management of the care of persons receiving analgesia by catheters and pain control infusion devices. Evaluation and documentation of competence occurs on a periodic basis, but at least annually according to institutional policy.

This response is not intended to be binding on any party. Also, the response by the Board is not a Declaratory Ruling and the Board will not be precluded from adjudicating the issue in a contested case forum should the necessity arise.

June 18, 1992