IMPLEMENTATION OF A REGIONAL ANESTHESIA BLOCK NURSE TEAM IN THE PERIANESTHESIA CARE UNIT (PACU) ADVANCES PATIENT SAFETY GOALS

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Background Information:
Pre-operative placement of peripheral nerve blocks results in a 30% overall reduction of surgical complications, yet this process when done prior to entry to the OR, creates delays in start times, which prevents eligible patients from receiving pre-operative nerve blocks. Incidents of wrong-sided blocks occur because providers fail to perform a “time out” prior to the block procedure.

Objectives:
To provide for more patients to receive pre-operative nerve blocks in the PACU pre-op holding without delays to OR start times.
To prevent wrong-sided blocks by instituting a nurse initiated “time-out” protocol prior to the block procedure and with each position change

Implementation:
A team of PACU nurses was established and trained to assist with the placement of regional nerve blocks in the perioperative setting. The team trained in monitoring for post-procedural complications, placement of rescue blocks for pain control, and emergency situations related to the placement of regional anesthesia blocks.

Successful Practice:
Since the implementation of the block nurse team, multiple services have increased the volume of patients who receive pre-operative nerve blocks. The orthopedic service continues to experience a decrease in delays to operating room start times. Since the implementation of the nurse initiated time out there have been no wrong-sided peripheral nerve blocks for the perioperative area.

Implications for Advancing the Practice of Perianesthesia Nursing:
The success of this team has inspired the creation of a regional anesthesia block nursing preceptorship with competency validation in moderate sedation and placement of regional anesthesia in the PACU.