AN ALGORITHM TO USE AS A TOOL FOR THE BEDSIDE PACU NURSE TO MANAGE POST-OP PAIN

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Rapid pain intervention is crucial in the immediate postanesthesia period to prevent further complications. Based on the Department of General Anesthesiology’s PACU/SDS Quality Indicators, a “Pain score > 5 for > 60 minutes” was recorded more often than any other patient event in PACU, even after various pain interventions were performed. Of all patient events noted between January and June 2012, 63% were related to delayed pain management. These interventions included Patient Controlled Anesthesia, Epidural, Peripheral Nerve Catheters, and as needed medications.

The objective of this project was to standardize the interventions and also efficiently manage pain immediately in the postanesthesia period.

A literature search was performed and there was a lack of information regarding the management of acute postoperative pain that met the PACU’s needs. A group of PACU nurses, who are also a part of a hospital-wide group called Pain Mentors, created an algorithm to clearly define pathways of treatment for postanesthesia pain. It further distinguishes a pathway for opioid dependent patients with acute postanesthesia pain.

Trends in Quality Indicators over the second half of 2012 show improved pain management within the first hour of care in PACU. Newer nurses report that the algorithm assists them with decision-making as they increase their comfort with this patient population, especially with opioid dependent patients.

The implementation of a PACU pain algorithm not only helps standardize nursing practice and interventions but also empowers nurses to manage postoperative pain in the chronic pain patient.