PROVIDING REGIONAL ANESTHESIA SERVICE IN PREOPERATIVE HOLDING

Team Leaders: Gail Davis, CNM, APRN, Amy Cooper, BSN, RN
Barnes-Jewish Hospital, St. Louis, Missouri

BACKGROUND INFORMATION:
Our institution is a Level One transplant/trauma center and performs over 140 surgeries a day. Due to heightened awareness of all services wanting to optimize postoperative pain management, there has been an increase in number of patients requiring the use of the regional anesthesia service (RAS), our facility initiated placing specialized blocks and epidurals in patients in the holding area preoperatively. Previous placement of regional anesthesia in surgical patients was performed in a separate room adjacent to the operating rooms.

OBJECTIVES OF PROJECT:
The perianesthesia care unit (PACU) would be prepared to facilitate increasing number of regional anesthesia procedures. Patients would benefit from services and experience improved patient outcomes.

PROCESS OF IMPLEMENTATION:
To create a safe, efficient regional anesthesia service in the holding area, a monthly PI (performance improvement) committee was initiated. Members include physicians, clinical nurse manager, staff, regional support RN and technician, and pharmacist. Work standards were identified and formulated. Policies, procedures and standards of care were developed. An anesthesia representative identified equipment and supplies needed for the various regional anesthetics. A mobile cart was purchased and stocked with the needed anesthesia supplies. The RAS nurse assigned was given a portable telephone to carry to promote efficient communication between the operating room and the regional anesthesia area. Nurses were educated on the new policy, procedure and standards.

STATEMENT OF SUCCESSFUL PRACTICE:
The volume of regional anesthesia patients increased with the advent of using the holding area as the location of placement. Across our two floors, all three preoperative areas now have their own regional cart, supplies, procedural tech and RN support. Pain management postoperatively has been better controlled.

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:
Being prepared to assist with regional anesthesia for PACU patients will provide safe and effective pain management postoperatively.