

DEVELOPMENT OF A PRE-OP PEDIATRIC MEDICATION ADMINISTRATION GUIDELINE FOR RN CALLERS

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Background Information: Caregivers of children going to surgery who take daily medications need pre-op administration instructions. In general, it is advantageous for children to continue taking their medications although there are some that should be held due to concerns about side effects and/or interactions with anesthetic agents.

At our institution, registered nurses (RNs) contact caregivers two days before surgery to give arrival and fasting instructions. Any medication administration questions were forwarded to a nurse practitioner (NP) in the pre-anesthesia clinic. This has often resulted in multiple phone calls, delays and inconvenience for the caregiver and the RN caller.

Objectives of Project: After evaluation, it was determined that if the RN callers had a medication administration guideline they would be able to provide all the instructions in a single phone call and work within the full scope of their licensure.

Process of Implementation: Two pre-anesthesia NPs, the lead RN caller and the surgery nurse educator met to discuss the development of a guideline. A search of the literature was done looking for existing guidelines but results were limited and no pediatric guidelines were found.

A guideline was developed using an existing informal list of medication administration instructions as a starting point. Every effort was made to include the most commonly taken outpatient medications. Medications were listed by body system, generic and trade names. They were categorized as those that "should not be given", "could be given cautiously" and "should be encouraged to be given". An added disclaimer stated the guideline was not an all-inclusive list and RN callers should contact the pre-anesthesia NPs or the charge anesthesiologist with questions. Representatives from nursing, pharmacy, anesthesia and surgery approved the guideline.

Statement of Successful Practice: Following introduction and education to the RN callers the guideline was introduced 9-1-16. Preliminary feedback has been positive. A formal evaluation is planned in the future.

Implications for Advancing the Practice of Perianesthesia Nursing: Use of the guideline improves RN efficiency and autonomy. RNs are now able to provide medication instructions during a single phone call, allowing them to work within the full scope of their licensure.