

Partners in Pain Relief: Pre-Procedure Nurses Owning the Block Assist Role

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Abstract Background Information: Traditionally, operating room (OR) nurses assisted anesthesiologists with peripheral nerve blocks in the pre-procedure area. However, a rise in scheduled surgical cases created an urgent need for OR nurses to remain in the operating rooms to staff surgeries. To address this challenge, ACLS-certified pre-procedure (prep-recovery) nurses were identified as qualified candidates to support anesthesia providers during peripheral nerve block procedures. This transition marked a significant change in practice and required targeted training to ensure safe and effective implementation.

Objectives of Project: The primary objective of this initiative was to empower ACLS-certified prep-recovery nurses with the knowledge, skills, and confidence necessary to assist anesthesiologists in the administration of peripheral nerve blocks within the pre-procedure setting. This practice transformation aimed to enhance interdisciplinary collaboration, optimize staffing resources, and support the delivery of multimodal pain management strategies.

Process of Implementation: Training included a comprehensive block nurse competency program. Educational components featured a checklist adapted from Elsevier, articles on Local Anesthetic Systemic Toxicity (LAST), AORN guidelines for perioperative care in regional anesthesia, PowerPoint presentations, digital learning modules, and policy reviews. Nurses progressed through a structured clinical pathway: observing a block, assisting with a trained nurse, and ultimately performing the role independently.

Statement of Successful Practice: Prep-recovery nurses have successfully demonstrated the ability to independently and effectively support anesthesia providers during peripheral nerve blocks, eliminating the need for OR nurse involvement in this role. Their expanded scope of practice includes technical competencies such as sterile technique, patient positioning, and familiarity with block-specific equipment.

Implications for Advancing the Practice of Perianesthesia Nursing: Clinically, trained nurses showed improved use of continuous EKG monitoring and vigilant patient observation during block administration. Their awareness of potential complications, including LAST, supported early recognition and intervention, reinforcing a culture of safety and excellence in perianesthesia care.