ARTICLE IN PRESS

Pain Management Nursing xxx (xxxx) xxx

[mNS;March 23, 2023;9:24]



Contents lists available at ScienceDirect

Pain Management Nursing

journal homepage: www.painmanagementnursing.org

Society Position Statement/White Paper

Registered Nurse Management and Monitoring of Analgesia by Catheter Techniques

Janette E. Elliott, MSN, RN, CNS, AOCN, PMGT-BC^{1,*}, Margaret Fischer, MSN, PMGT-BC, ANP-BC², Kathy Meloche, BSN, RN, PMGT-BC³, Ann Quinlan-Colwell, PhD, CNS, PMGT-BC, RN, AHNBC⁴, Teri Reyburn-Orne, MSN, PPCNP-BC/CPNP-AC, PMGT-BC, AP-PMN⁵

¹ From the Independent Consultant, Los Osos, California

² Independent Consultant, Stony Brook, New York

³ Detroit Medical Center, Detroit, Michigan

⁴ Independent Consultant, Wilmington, North Carolina

⁵ University of Colorado, Denver, Aurora, Colorado

ARTICLE INFO

Article history: Received 26 January 2023 Accepted 6 February 2023 Available online xxx

Issue Addressed

Updated guidance is needed for Registered Nurses (RN) who care for patients receiving analgesia via a catheter technique.

Background

Administration of analgesic medications (i.e., opioids and/or local anesthetics) through neuraxial (epidural [EpC]; intrathecal catheter [ITC], implanted intrathecal pump [IITP]) or peripheral nerve catheters (PNC) and intrapleural catheters (IPC) is an important component of multimodal post-surgical pain management to improve opioid sparing analgesia (Beverly et al., 2017; Chou et al., 2016; Gabriel et al., 2019). Including neuraxial techniques in a multimodal analgesic plan of care is beneficial for patients with chronic malignant and non-malignant pain (Chou et al., 2016). Appropriate management of the catheters and monitoring of the patient by RNs is essential for optimizing patient safety and comfort (Pasero et al., 2007). Management and monitoring include: (1) astute patient assessment of the catheter site; (2) reports of pain; (3) medication actions and side effects; (4) sedation; (5) respiratory depression; (6) neurologic assessment as indicated by catheter and

E-mail address: Janette.Elliott49@gmail.com (J.E. Elliott).

solution utilized; (7) any pharmacologic or metabolic coagulopathy; and (8) potential complications (e.g., site infection, epidural hematoma, local anesthetic systemic toxicity) (Cooney & Quinlan-Colwell, 2021; Pasero et al, 2007). All related responsibilities and actions must be within the scope of practice delineated in the state where the RN practices and supported by policies, protocols, and annual competencies within the institution.

Position

This position statement reinforces the 2007 American Society for Pain Management Nursing (ASPMN) position that the administration of analgesia, including analgesia by catheter techniques are within the registered nurse scope of practice. The ASPMN supports the role of RNs in the administration and management of analgesia via catheter technique including monitoring for potential side effects or complications of care among patients of all ages and in all settings.

References

Beverly, A., Kaye, A. D., Ljungqvist, O., & Urman, R. D. (2017). Essential elements of multimodal analgesia in enhanced recovery after surgery (ERAS) guidelines. *Anesthesiology Clinics*, 35(2), e115–e143.

Chou, R., Gordon, D. B., de Leon-Casasola, O. A., Rosenberg, J. M., Bickler, S., Brennan, T., Carter, T., Cassidy, C. L., Chittenden, E. H., Degenhardt, E., Griffith, S., Manworren, R., McCarberg, B., Montgomery, R., Murphy, J., Perkal, M. F.,

https://doi.org/10.1016/j.pmn.2023.02.002

1524-9042/© 2023 Published by Elsevier Inc. on behalf of American Society for Pain Management Nursing.

Please cite this article as: J.E. Elliott, M. Fischer, K. Meloche et al., Registered Nurse Management and Monitoring of Analgesia by Catheter Techniques, Pain Management Nursing, https://doi.org/10.1016/j.pmn.2023.02.002

 $^{^{\}ast}$ Address correspondence to Janette E. Elliott, MSN, RN, CNS, AOCN, PMGT-BC, Street Address, Los Osos, California

2

ARTICLE IN PRESS

J.E. Elliott, M. Fischer, K. Meloche et al./Pain Management Nursing xxx (xxxx) xxx

Sursh, S., Sluka, K., Strassels, S., ... Wu, C. L. (2016). Management of postoperative pain: A clinical practice guideline from the American Pain Society, the American Society of Regional Anesthesia and Pain Medicine, and the American Society of Anesthesiologists' committee on regional anesthesia, executive committee, and administrative council. *Journal of Pain*, 17(2), 131–157.
Cooney, M., & Quinlan-Colwell, A. (2020). Assessment and multimodal management

Cooney, M., & Quinlan-Colwell, A. (2020). Assessment and multimodal management of pain: An integrative approach. St. Louis, MO: Elsevier Health Sciences. Gabriel, R. A., Swisher, M. W., Sztain, J. F., Furnish, T. J., Ilfeld, B. M., & Said, E. T. (2019). State of the art opioid-sparing strategies for post-operative pain in adult surgical patients. *Expert Opinion on Pharmacotherapy*, 20(8), 949–961.

Pasero, C., Eksterowicz, N., Primeau, M., & Cowley, C. (2007). Registered nurse management and monitoring of analgesia by catheter techniques: Position statement. *Pain Management Nursing*, 8(2), 48–54.