

PATIENT CONTROLLED ANALGESIA DOCUMENTATION

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Purpose and PICO Question

The purpose of this study is to show how education to nurses specific to proper administration of patient controlled analgesia (PCA) will improve documentation and effectiveness of pain management. The PICO question is 'Will nursing education in regard to patient controlled analgesia and related documentation improve compliance to PCA documentation'.

Background and Evidence Review

In cancer patients, 60%-70% experience pain during their illness. Hospital protocol on management of PCA requires nurses to assess and document pain intensity and pain relief evaluation every four hours. At the end of shift, medication history of the pump should be cleared and documentation of the amount of medication entered. This type of pain reassessment enhances communication between nurses and patients, resulting in a patient's perception that their needs are being addressed. Clinical practice guidelines recommend improved pain management through better documentation. Poor nursing reassessment and lack of documentation will affect patients' pain relief. Studies show that education changes nurses' pain management practice.

Methods

A preaudit was done by chart review for one month of all patients on a medical oncology unit who had PCA. (10 patients)

Documentation:

Compliance with end of shift medication history was 80 %

Compliance with every four hours pain relief was 10%

Compliance with every four hours pain intensity was 60 %

PCA nursing education consisted of a ten minute teaching in the first week of July, 2009 with protocol of PCA administration and poster board reinforcement of education. The talk included the results of the preaudit chart review and importance of documentation. Forty-one out of forty-seven nurses received the educational intervention and participated in the study.

An audit by chart review post intervention compared the same areas of documentation. (10 patients). The Clinical Effectiveness Department assisted with data interpretation and collection. Nursing Education assisted with PCA educational tools for patients and staff.

Results

Documentation post intervention:

Compliance with end of shift medication history was 90% (Increase of 10%)

Compliance with every four hours pain relief was 60% (Increase of 50%)

Compliance with every four hours pain intensity was 100 % (Increase of 40%)

The results reflect the impact of education to nurses on improved documentation and change in nursing practice. Reassessment and documentation are effective tools in pain management for the areas studied.

Conclusion

The results of this study reinforce the need for nursing education for PCA administration and documentation not only on this cancer unit, but the American Society of Anesthesiologists endorses PCA administration in surgical patients for post operative pain relief. The major challenge was nurses work flow and time management. Hopefully the sharing of the positive results will continue to motivate nurses to improve practice. Nursing education will continue with PCA education throughout the appropriate units in the hospital.

References

- Pain (2009) "Cancer Symptoms". <http://www.cancersymptoms.org>
- Idell, C. S., Grant, M., & Kirk, C. (2007). "Alignment of pain reassessment practices and national comprehensive cancer network guidelines." Oncology Nursing Forum **34**(3): 661-71.
- Sterman, E., Gauker, S., & Krieger, J. (2003). "A comprehensive approach to improving cancer pain management and patient satisfaction." Oncology Nursing Forum **30**(5): 875-61.

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