

PAIN CONTROL NEWSLETTER

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KAISER PERMANENTE - LOS ANGELES MEDICAL CENTER
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Pain Resource Nurse Program

By Emma Cuenca, DNPc, RN, MSN, CCRN-CSC, CNS

Pain management remains a challenge in many areas of healthcare. Studies continue to indicate that 50–75% of surgical patients experience moderate to severe postoperative pain (Bell & Duffy, 2009; Mac Lellan, 2004; McGrath B. et al, 2004). In spite of available clinical practice guidelines, gaps still exist in appropriately and adequately managing patient's pain (Richards & Hubbert, 2007; Paice, Barnard, Creamer, Omerod, 2006). The Joint Commission (TJC) has acknowledged the importance of pain management and assessment by incorporating it in their accreditation process (TJC, 2008).

Pain has negative effects on patients. It induces a “fight” or “flight” endocrine stress response that increases mortality and morbidity, particularly in very vulnerable patient populations, such as the young, the very old, and the critically ill (Erstad, 2009; Hutchison, 2007; Yeager, 2004). Pain induces increased myocardial oxygen consumption, tachycardia, immunosuppression and cancer cell proliferation, increased muscle breakdown for protein metabolism, poor wound healing, inadequate sleep, exhaustion, disorientation and anxiety, psychological disorders, and avoidance of movement which contributes to deep vein thrombosis and pulmonary embolism (Erstad, 2009). This can translate to prolonged hospital length of stay and decreased patient satisfaction.

Our overall HCAHPS score in LAMC in 2011 on pain management was on the 70th percentile and in NSU 50th percentile. NSU initiated its QI efforts last year to improve the Avatar score on pain management but was unable to sustain the gains.

This year we implemented the Pain Resource Nurse (PRN) – Pain Champion (PC) program in NSU as a pilot unit. This was designed to replicate the processes of published successful PRN programs in improving patient satisfaction with pain management.

To initiate the program, all NSU CNCs and a couple of NSU staff RNs attended an 8-hour Pain Champion training. All NSU nurses attended the 2 hour pain inservice incorporated in the mandatory annual update. There are 7 Pain Resource Nurses who completed a 3-day training in the City of Hope Hospital.

The unit activities specific to the PRN/PC roles are: daily monitoring of nurses' documentation of pain management, weekly patient interviews regarding pain management, biweekly pain huddle on specific pain facts/issues, quarterly newsletter development, monthly PRN/PC meetings & staff inservice on pain topics.

Data on pain assessment documentation and patient interviews are continuously monitored. Our NSU data show positive trend towards improvement. Our goal is to reach 90th percentile within a year and sustain it. The key to success is understanding that it is the patients' right to have their pain managed and we the care providers have that responsibility to appropriately and effectively manage their pain. Another key to success is leadership support of the program establishing pain as a priority and allocating appropriate resources.

PAIN ADVOCACY

If you encounter any situation where you feel the patient's pain is not managed appropriately, please call one of us and we will gladly discuss it with you.

PRN Team

Case Study.....what would you do?

By Heejeong Kim, MSN, RN, CNS

You are caring for a patient S/P lumbar laminectomy #POD 2. Morphine PCA was discontinued @ 7am and oral pain med (Norco) and Morphine IV PRN are ordered. Acceptable pain level is 3 and pain level of the patient with activities is 7.

Patient just finished breakfast in bed and denies any pain @ 8am. Physical therapy is scheduled @ 9am. Last pain medication was PCA @ 1 am. What is the most appropriate nursing action to manage the pain?

Option 1: Discuss this case with your colleagues and share the interventions that you think are appropriate for the patient.

Option 2: E-mail your response to:
[LAMC PRN_Pain Team-KPSC-LAMC](mailto:LAMC_PRN_Pain_Team-KPSC-LAMC)

The PRN team will select the best answer and will give a small token to the senders.