

Section: Division of Nursing

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PROCEDURE

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HACKETTSTOWN REGIONAL MEDICAL CENTER

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PACU
(Scope)

TITLE: POST OP CARE OF PACU PATIENT AFTER SPINAL OR EPIDURAL ANESTHESIA

PURPOSE: To outline the steps for post op care of PACU patient.

CONTENT:

PROCEDURE STEPS:

KEY POINTS:

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| <ol style="list-style-type: none"> 1. Maintain patient IV line. 2. Provide and maintain good body alignment. 3. Avoid hyperextension of the joints. 4. Ensure bedding is not constricting at the feet and toes. 5. Avoid rapid position changes. 6. Monitor vital signs every 15 minutes during Phase I recovery. 7. Assess level of the regional anesthesia by touching patient side and determine from patient if there is "normal" sensory feeling or "abnormal". The level of "normal" sensation will correspond with a dermatome. (see attached) 8. Assess effectiveness of regional anesthesia for pain relief (pain scale 0-10) 9. Monitor respiratory function closely. This can be decreased if the IV sedation has been used. | <p>To provide rapid access for medications if required.</p> <p>Motor and sensory function below the waist are lacking.</p> <p>This can cause lower blood pressure since the circulatory system cannot compensate to rapid movements.</p> <p>As the regional anesthesia resolves, the sensory and motor functions return, usually at different times. (i.e., motor then sensory)</p> <p>If the agent is short acting, a different form of pain relief may be indicated.</p> |
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10. Administer O₂ via NC at 5L/min., unless otherwise ordered, until motor and sensory function returns.
11. Encourage coughing and deep breathing every 15 minutes.
12. Provide Passive Range of Motion exercises to lower extremities every 15 minutes. Maintains adequate circulation.
13. Check for signs of bladder distention.
14. Catheterize if needed especially if the patient has had pelvic or perineal surgery. Physician order needed.
15. Observe for signs of return of motor sensory capability prior to discharge from PACU. Cannot always be accomplished with longer acting agents.
Example: Some movement of at least toes, tactile sensation in the feet, pain at the op site.
16. Patient's stretcher needs sign "REGIONAL ANESTHESIA" at foot of stretcher and also posted on post-operative bed upon transfer.

- DOCUMENTATION:
1. In PACU Record, document effectiveness of regional anesthesia for pain control (pain scale 0-10) and any other interventions necessary.
 2. In PACU Record, the admission and discharge sensation dermatome should be documented (see attached).

Level	Bony Landmark	Skin Landmark
C7	Vertebral Prominens	
T3	Root of Scapula Spine	
T4		Nipple
T6	Xiphoid Process	
T10		Umbilicus
L1		Inguinal Ligament
L2-3	Knee	
L4	Superior Aspect Iliac Crest	
S2	Posterior Superior Iliac Spine	

