



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Division of Health Professions Licensure
Board of Registration in Nursing

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July 15, 2010

To: Massachusetts Professional Nursing and Healthcare Organizations

From: Laurie Talarico, MS, RN, NP
Nursing Practice Coordinator

Re: Advisory Rulings 9903 and 9904 Rescinded by Board
Advisory Ruling 10-01 Added by Board

At the July 14, 2010 Board of Registration in Nursing (Board) meeting the Board rescinded Advisory Ruling 9903 *Management of the Non-Pregnant Patient Receiving Analgesia by Catheter Techniques* and Advisory Ruling 9904 *Management of the Pregnant Patient Receiving Analgesia by Catheter Techniques*.

Concurrently, the Board issued Advisory Ruling 10-01: *Management of Patients Receiving Analgesia by Catheter Technique* to guide the practice of the Registered Nurse who, as a function of their employment or setting, have clinical responsibilities that include administration and management of analgesic medication by catheter technique.

Advisory Ruling 10-01 is included in this document for your review and can be viewed electronically on the Board's website www.mass.gov/dph/boards/rn .

Massachusetts Board of Registration in Nursing
Advisory Ruling on Nursing Practice

Title: Management of Patients Receiving Analgesia by Catheter Technique

(Formally Advisory Ruling 9903 *Management of the Patient Receiving Analgesia by Catheter Techniques* and Advisory Ruling 9904 *Management of the Pregnant Patient Receiving Analgesia by Catheter Techniques* - Date Issued: August 12, 1998, Date Revised: May 2002, March 14, 2007, Date rescinded: July 14, 2010, replaced with Advisory Ruling 10-01: *Management of Patients Receiving Analgesia by Catheter Technique*)

Advisory Ruling Number: 10-01

Authority:

The Massachusetts Board of Registration in Nursing (Board) issues this Advisory Ruling on Nursing practice pursuant to Massachusetts General Laws ("G.L."), chapter 30A, section 8 and chapter 112, section 80B.

Date Issued: July 14, 2010

Scope of Practice:

Registered Nurse (RN)

Purpose:

To guide the practice of the Registered Nurse (RN) whose clinical responsibilities include the administration and management of analgesic medication by catheter technique in order to alleviate acute or chronic pain, regardless of patient age or setting, by epidural, intrathecal, intrapleural, peripheral nerve routes. Such practice must be in compliance "G.L." c. 112, s. 80B, 244 CMR 3.02: Responsibility and Functions - Registered Nurse; 244 CMR 9.03 (5): Adherence to Standards of Nursing Practice; 244 CMR 9.03 (8): Identification Badge; 244 CMR 9.03 (9): Responsibility and Accountability; 244 CMR 9.03 (10): Acts within Scope of Practice; 244 CMR 9.03 (11): Performance of Techniques and Procedures; 244 CMR 9.03 (12): Competency; 244 CMR 9.03 (14): Asepsis and Infection Control; 244 CMR 9.03 (38) Administration of Drugs; 244 CMR 9.03 (39) Documentation of Controlled Substances; and 244 CMR 9.03 (44): Documentation.

For the purpose of this Advisory Ruling, the term "duly authorized anesthesia provider" means anesthesiologist licensed by the Board of Registration in Medicine and Advance Practice Registered Nurses authorized by the Board of Registration in Nursing as Nurse Anesthetists.

Advisory:

Management of the patient receiving analgesia by catheter technique may be performed only under the following provisions:

- The RN will assume only those duties and responsibilities within his or her scope of practice and for which he or she has acquired and maintained necessary knowledge, skills and abilities to administer and/or manage analgesia by catheter technique. This includes removal of the catheter, safely, effectively and competently, and knowledge of emergency therapeutic measures, under established employer policies and procedures;
- The RN will assume responsibility for the patient only after the duly authorized anesthesia provider:

- has obtained consent for the procedure;
 - has placed and verified the correct placement of the catheter/infusion device;
 - has provided the initial dosing and established the desired level of analgesia; and,
 - has determined that the patient's vital signs are stable.
- The RN will verify orders that orders written by a duly authorizer prescriber include, at a minimum the;
 - drug name,
 - diluent type
 - concentration, and
 - dosing parameters.
- For the management of the **non-pregnant** patient receiving analgesia by catheter technique, there must be established employer policy and procedure before the RN can perform the following:
 - prepare the medication for administration using an infusion device;
 - replace empty infusion drug reservoirs with new, pre-prepared solutions containing the same medication and concentration ordered by a duly authorized prescriber;
 - adjust the drug dose or infusion rate per orders of a duly authorized prescriber;
 - administer a prescribed re-bolus of the medication by continuous infusion by syringe or pump, when the patient has received a previous bolus dose by a duly authorized anesthesia provider;
 - troubleshoot the infusion device, change infusion device batteries, and tubing;
 - stop the infusion;
 - after receipt of a specific order and verifying the patient's anticoagulation status, remove the catheter.
- For the management of the **pregnant** patient receiving analgesia by catheter technique, there must be established employer policy and procedure, which includes access to a readily available duly authorized anesthesia provider, before the RN can perform the following:
 - prepare the medication for administration using an infusion device;
 - assist in maintaining a continuous epidural infusion by replacing empty infusion drug reservoirs with new, pre-prepared solutions containing the same medication and concentration prescribed by a duly authorized prescriber;
 - troubleshoot the infusion device, change infusion device batteries, and tubing;
 - stop the continuous infusion if there is a safety concern or the woman has given birth;
 - after receipt of a specific order and verifying the patient's anticoagulation status, remove the catheter; and
 - Management, by a nurse, of the pregnant patient receiving analgesia by catheter technique does **NOT** include:
 - ❖ administering the initial dose of medication,
 - ❖ adjusting the dose or infusion rate of the medication,

- ❖ administering a bolus or re-bolus of medication, or
 - ❖ re-starting the infusion once it has been stopped.
- The RN will practice in accordance with accepted standards including communication with a duly authorized anesthesia provider and other providers in attendance regarding patient status or changes in status during therapy;
 - The RN will adhere to standard precautions and to principles of asepsis and infection control and will not place self, patient or others at risk for infectious disease transmission;
 - The RN will document the handling, administration and destruction of controlled substances in accordance with all federal and state laws and regulations and in a manner consistent with accepted standards of nursing practice; and
 - The RN will ensure documentation is complete, accurate and legible in all records required by federal and state law.
 - The following are **NOT** considered to be within the scope of practice of a RN who is not a duly authorized anesthesia provider for the management of the patient receiving analgesia by catheter technique:
 - insertion of the catheter for analgesia;
 - verification the position of the catheter;
 - advancing or repositioning the catheter; and
 - administration of the first dose of medication or initiation of the continuous infusion.

References:

- Pasero, Chris, et al. "Registered Nurse Management and Monitoring of Analgesia by Catheter Techniques: Position Statement"; *Pain Management Nursing*. 2007;8(2):48-54.
- Federal Register: 21 CFR Ch. I § 201.57(c)(1); 4-1-08 Edition
- <http://www.aana.com/Resources.aspx?id=778&terms=position+statement+2.8>; AANA Position Statement 2.8: Pain Relief via Continuous Pain relief Devices; June, 2003.
- <http://www.asahq.org/publicationsAndServices/standards/nurses.pdf> ASA Statement on the Role of Registered Nurses in the Management of Continuous Regional Analgesia; October, 2008
- http://www.awhonn.org/awhonn/binary.content.do?name=Resources/Documents/pdf/5_Epidural.pdf AWHONN position statement Role of the Registered Nurse (RN) in the Care of the Pregnant Woman Receiving Analgesia/Anesthesia by Catheter Techniques (Epidural, Intrathecal, Spinal, PCEA Catheters); re-approved June, 2007
- <http://www.soap.org/media/newsletters/fall1997/procon.htm> The Role of Obstetric Nurses in Labor Analgesia Management, Pro-Con Clinical Forum; Fall, 1997
- <http://www.nursingworld.org/NursingPractice> ANA Position Statement Role of the Registered Nurse in the Management of Analgesia by Catheter Techniques - 9/91