



Within Sixty is Nifty: Improving Long-Bone Pain Management Outcomes



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Purpose

In July 2013, the median time to pain management for long-bone fractures had increased to 103 minutes exceeding the goal of 60 minutes



Median time to pain medication within 60 minutes

Design

Quality Improvement project

Setting

Teaching, urban emergency department with 61,000 visits



Participants

All ED RN's
ED Quality Nurse
ED Nursing Leadership
ED Physicians

Relevance/Significance

Timely and effective care supports optimum outcomes and improved patient comfort



Pain Management Needed



Methods

- Identifiable barriers during staff meetings and daily huddles
- Inability to be immediately evaluated by physician
 - Pain protocol orders not being used
 - Visualization of medicated patients

Methods

Ideas for change came from the staff

Pain protocol policy was revisited with the staff

Medication Standing Orders Protocol for Pain

1. Pain **Level 1 to 6**
 - a. Acetaminophen 650 mg by mouth. (See Contraindications Below)
 - b. If Acetaminophen has been taken within 4 hours of presentation to the Emergency Department, then administer Ibuprofen 600 mg by mouth. (See Contraindications Below)
 - c. If both Ibuprofen and Acetaminophen have been taken within 4 hours of presentation, then patient must await evaluation by LIP.
 - d. For Abdominal Pain give Morphine Sulfate 2 mg IV and notify LIP of administration.
 - i. If no IV access available, give Morphine Sulfate 2 mg SC and notify LIP of administration.
 - ii. Hold for SBP < 90.
 - iii. Hold for age > 70.
2. Pain **Level 7 to 10**
 - a. One tab of Hydrocodone/Acetaminophen (Vicodin) 5/300.
 - b. For abdominal pain, flank pain, or acute bony dislocation (except for finger dislocation) give Morphine Sulfate 4 mg IV and notify LIP of administration.
 - i. If no IV available, give Morphine Sulfate 4 mg SC and notify LIP of administration.
 - ii. Hold for SBP < 90.
 - iii. Hold for age > 70.

Better visualization with New ED renovations



Recognition: Daily Huddles
Email Notification,
Badge Emblem



Results/Outcomes

One year later, our median time to pain medication was 25 minutes



Implications

Emergency departments need to share collaborative strategies that will assist improving pain management for this population

Breaking down barriers, weekly staff recognition, badge recognition, and celebrating accomplishments are important strategies that worked with this initiative

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