



### **Interpretive Guideline**

**Title:** Role of the Registered Nurse in Administering, Managing, and Monitoring Patients Receiving Epidural Infusions: Excluding Obstetrical Patients

**This guideline applies only to epidural infusions regulated by programmable infusion devices.**

This guideline does not include the care of patients receiving epidural infusions during labor and delivery, or care of patients receiving intrathecal analgesia or intrathecal infusions.

#### **Guidelines for Monitoring and Management of Epidural Infusions:**

The registered nurse assuming care of the patient should not do so until the authorized provider who placed the catheter has verified and documented correct catheter placement for use. An authorized provider is an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice.

Monitoring sedation levels, analgesic effect, and other clinical parameters for patients receiving epidural infusions may be within the scope of registered nursing practice if the following guidelines are observed (Section 4723.01(B), Ohio Revised Code (ORC)):

- A. With a valid order from an authorized provider, the registered nurse may:
  1. Administer and monitor medication infused through an epidural catheter at the rate prescribed;
  2. Increase or decrease the infusion rate;
  3. Continue the infusion by replacing a bag or syringe with a pharmacy prepared solution containing the identical medication;
  4. Replace a bag or syringe with a pharmacy prepared solution containing a new medication;
  5. Stop the continuous infusion if there is a safety concern;
  6. Initiate emergency therapeutic measures according to employer/institutional policy if complications arise;
  7. Remove the epidural catheter\*, if the catheter insertion was documented as uncomplicated and no catheter-related complications have occurred.
  
- B. In executing a nursing regimen, the registered nurse should:
  1. Monitor the patient's vital signs, mobility, level of consciousness, and perception of pain;
  2. Stop the infusion if there is a safety concern;
  3. Communicate any changes in patient status to the authorized provider as indicated by employer/institutional policy. An authorized provider is an individual who is

authorized to practice in this state and is acting within the course of the individual's professional practice.

A registered nurse caring for a patient receiving an epidural infusion should not:

1. Insert or reposition an epidural catheter; or
2. \* Remove the following types of epidural catheters:
  - a. a tunneled epidural catheter,
  - b. an epidural catheter with exposed metal, or
  - c. a spinal cord stimulator placed in the epidural space.

### **Considerations in Providing Epidural Care (Rule 4723-4-03, Ohio Administrative Code, (OAC))**

1. The registered nurse providing care to patients receiving epidural infusions should maintain documentation of his/her acquisition of education, demonstration of competency, and any other documents necessary to ensure that practice is in compliance with employer/institutional policies and procedures. A licensed authorized provider must be readily available as defined by employer/institutional policy, to manage any complications that might arise when the registered nurse is monitoring or administering epidural infusions.
2. The registered nurse's education/training and demonstrated competence should include, but is not limited to, the following:
  - a. Epidural anatomy and physiology;
  - b. Indications, contraindications, and potential complications related to analgesia technique and medications;
  - c. Pharmacology of analgesia medications administered via the epidural route;
  - d. Catheter maintenance and removal;
  - e. Utilization of appropriate monitoring modalities, infusion devices, and related equipment;
  - f. Patient care responsibilities during epidural infusions, including, but not limited to: observation and monitoring of sedation levels and other parameters; applicable teaching for patients and family/significant other; and other nursing care responsibilities as defined in employer/institutional policy. An authorized provider is an individual who is authorized to practice in this state and is acting within the course of the individual's professional practice.

### **Accountability and Responsibility of Nurses**

Section 4723.01(B), ORC, defines the scope of practice for the registered nurse. Rule 4723-4-03, OAC, holds registered nurses responsible for maintaining and demonstrating current knowledge, skills, abilities, and competence in rendering nursing care within their scope of practice.

The registered nurse must apply the Nurse Practice Act (Chapter 4723, ORC) and rules regulating the practice of nursing (Chapters 4723-1 to 4723-27, OAC) to the specific practice setting. Further, the registered nurse must utilize good professional judgment in

determining whether or not to engage in a given patient-care related activity, consistent with the law, rules, and guided by the Board's *RN and LPN Decision Making Model*. It is critical to note that the law and rules require that the licensee provide nursing care only in circumstances that are consistent with their education, experience, knowledge, and demonstrated competency.

In this statement the Board does not announce a new policy but instead gives licensees specific instructions regarding their obligations under existing law and rules.

**Licensees should review the following:**

Section 4723.01(B), ORC

Rule 4723-4-03, OAC

Rule 4723-4-06, OAC

Rule 4723-4-07, OAC

Utilizing Interpretive Guidelines

A complete copy of the Nurse Practice Act and the administrative rules are available for review and download from the Board website at [www.nursing.ohio.gov](http://www.nursing.ohio.gov) on the Law and Rules page. All Interpretive Guidelines and the Utilizing Interpretive Guidelines document are available on the Practice RN and LPN page.

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