

PROTOCOL FOR: Spinal and Epidural Anesthesia: Perianesthetic Care

DESIRED PATIENT

- OUTCOME:
1. The patient will demonstrate or report adequate pain relief throughout the perioperative phase.
 2. The patient will receive appropriate prescribed medications, administered safely.
 3. The patient will have wound or tissue perfusion consistent with or improved from baseline levels.
 4. The patient will have pulmonary function consistent with or improved from baseline levels established preoperatively.
 5. The patient will have no injury related to transfer, transport, or ambulation.
 6. The lucid patient will demonstrate knowledge of the physiologic responses to the anesthetic technique and effects, including but not limited to:
 - expected effects: anesthesia and paresthesia
 - expected resolution

CLINICAL
ASSESSMENT
AND CARE:

Preoperatively and Intraoperatively

1. Review database and/or assess baseline neuromuscular status.
2. Provide physical and emotional support for patient and assist anesthesia provider during anesthetic placement procedure.

Postoperatively

1. Assess respiratory excursion: shortness of breath and use of accessory muscles.
2. Assess for cardiovascular depression: HR and BP deviations +/- 20% baseline; administer fluid resuscitation and medications, as ordered.
3. Assess mental status for CNS involvement.
4. Assess for motor and sensory blockade, using dermatome levels, and monitor for resolution.
5. Assess for nausea and vomiting; administer IV fluids and antiemetics as ordered.

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6. Assess for bladder distention; perform straight catheterization as ordered.
7. Assess for pruritis; administer Benadryl as ordered.
8. Assess anesthetic injection site for redness, bruising, swelling, and leakage.
9. For spinals/epidural anesthetics administered for postoperative pain control, assess for adequacy of pain relief and cardiovascular stability with HOB elevated.
10. Report any of the following:
 - shortness of breath and/or use of accessory muscles to breathe
 - symptomatic heart rate and blood pressure changes
 - mental status changes
 - unexpected delays in resolution of anesthesia
 - paresthesia or suspicion of sensory/motor deficits
 - inadequate pain relief in patients for whom the technique is for postoperative pain relief
 - nausea and vomiting which persists after increased IV fluid administration and antiemetics
 - urinary retention
 - anesthetic injection site abnormalities

APPROVAL: Nursing Standards Committee

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