

Department of Health and Human Services

# EPIDURAL / NERVE INFUSION PRESCRIPTION

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Hol	2100	13/11/2	2/17/11

LAUNCESTON GENERAL HOSPITAL

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OTHER NAMES					SEX		

### **Catheter Insertion Record**

Epidural / other				
Level	Depth	cm	Catheter Mark at Skin	cm
Date	Time		Inserted by	

#### **General Instructions**

- 1. No systemic opioids to be given while infusion is in progress, unless ordered by anaesthetist.
- 2. Give regular paracetamol as ordered unless contra-indicated.
- 3. Naloxone 0.4 mg and Ephedrine 30 mg/ml must be available.
- 4. Oxygen at \_\_\_\_ L/min via nasal prongs or at \_\_\_\_ L/min via mask to keep SpO<sub>2</sub> ≥ \_\_\_\_ %.
- 5. Maintain patent IV access for 6/24 post removal of epidural catheter.
- 6. Standard bolus using epidural pump is 5mL. See pain folder for instructions on inadequate analgesia.

#### **Prescription for Infusion Bags**

- 1. The prescription below can be used for ongoing administration.
- 2. Alterations to bag contents require a new prescription form.

☐ Bupivacaine 0.125% + Fer	ntanyl 2mcg/mL in 200 ml	L ☐ Bupivacaine 0.125% in 100 mL					
☐ Bupivacaine 0.25% in 100 mL ☐ Ropivacaine 0.2% in 100 mL							
Starting Rate mL/hr	Infusion Range from	tomL/hr					
Other orders:							
Anaesthetist's Signature:		Print Name:					
Date:							

## **Ceasing Infusion and Removing Epidural Catheter**

Epidural Infusions must not be ceased nor epidural catheters removed without consultation with an anaesthetist.

Epidural catheters must **NOT** be removed within 6 hours of subcutaneous unfractionated heparin or within 12 hours of subcutaneous low-molecular weight heparin.

within 12 hours of subcutarieo	us low-molecular weight heparin.
Catheter removed and tip intac	ct: Yes / No
Date/time:	Signature:
Print Name:	

# **Record of Infusion Bags**

Nursing staff to complete the below record for each epidural infusion administered.

Date	Time	Bag Contents	RN 1 Sign.	RN 2 Sign.	Start Time	Finish Time	mL given	mL left	RN 1 Sign.	RN 2 Sign.
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