

PROCESS FOR ACQUIRING EPIDURAL ANALGESIA FOR BRACHYTHERAPY PATIENT BC CANCER – KELOWNA

SUMMARY OF CHANGES

	NEW	PREVIOUS
BC CANCER		

1. Introduction

- Brachytherapy at BC Cancer- Kelowna utilizes the Anesthesiology services from Kelowna General Hospital on a contractual basis
- Procedures in the BC Cancer – Kelowna are completed utilizing either general or local anesthesia including epidural anesthetic which is not supplied by the BC Cancer – Kelowna pharmacy department.

1.1 Focus

- To provide guidelines for Brachytherapy staff to acquire, transport and document medications required for Epidural anesthetic for Brachytherapy patients.

1.2 Health Organization Site Applicability

- This procedure applies to Clerks, Nurses and Radiation Oncologists in the Brachytherapy program at BC Cancer – Kelowna; Anesthesia staffs from the Interior Health Authority providing support to the BC Cancer – Kelowna Brachytherapy program

2. Policy

2.1 Policy Statement #1

- The first purpose of this policy to define the process whereby BC Cancer Brachytherapy team members and Interior Health Anesthetists will best support Brachytherapy patients with epidural anesthesia for their procedure

2.2 Policy Statement #2

- The second purpose of this policy is to define and explain roles and responsibilities of various Brachytherapy team members to provide epidural anesthesia to patients in the BC Cancer – Kelowna Brachytherapy program.

3. Responsibilities and Compliance

3.1 Responsibilities

Anesthesia staff assessing a Brachytherapy patient in an Anesthetic Consult (ANCON) or Anesthetic Review (ANREV) capacity will note that patient may require an epidural for their procedure.

The Brachy CNL will liaise with the Anesthesia team member scheduled to support the BC Cancer – Kelowna Brachytherapy program for the date of the procedure, to notify of possible need for epidural medication and arrange for Anesthesia team member to pull epidural medication from Omni-cell at Kelowna General Hospital (KGH) prior to their planned shift at BC Cancer – Kelowna on the morning of the procedure. The anesthesiologist that removes the epidural medication should add to their log sheet and track usage/wastage on the log sheet.

To ensure that the patient has a KGH account for the day of the procedure, the Brachy CNL will ensure that either an MRI booking or Lab draw is booked. This will ensure the epidural medication can be tracked to an active KGH account for the day of the medication withdrawal from Omni-cell.

In order to ensure that nursing staff will have continuous support for any complications or concerns related to the epidural infusion, the anesthetist at BC Cancer - Kelowna will ensure that there will be an anesthesia team member from KGH available for nursing staff to access after the end of the OR slate at BC Cancer. The name and phone number of this supporting anesthetist will be provided to the recovery room nursing staff by the anesthetist who arranges the support at the time of their departure from BC Cancer – Kelowna.

In case of admission to KGH, the epidural anesthetic will be discontinued by nursing staff at BC Cancer – Kelowna prior to transfer. Any wastage of epidural medication will be witnessed by a second RN and noted in the red Narcotic Wastage Book. As well, the Anesthesia team member who initially signed out the epidural medication from KGH Pharmacy will be notified of the exact amount of the wastage so this can be entered onto their anesthesia log sheet for the date care was provided.

3.2 Compliance

Compliance with this policy is required by surgical/nursing/clerical staff of the BC Cancer Kelowna Brachytherapy program and anesthesia staff from the Interior Health Authority who support the BC Cancer – Kelowna Brachytherapy program

4. References

- Operating Room Nurses Association of Canada (ORNAC, 2017), Recommended Standards, Guidelines and Position Statements for Perioperative Registered Nursing Practice, 13th edition
- National Association of Peri-Anesthesia Nurses of Canada (NAPAN, 2017), Standards for Practice, 4th Edition

First Issued:	04-06-2019		
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Posted Date:	05-06-2019		
Version:	1		
Revision:	Name of Reviser	Description	Date
			DD-MMM-YYYY