

Children's Mercy Kansas City

## SHARE @ Children's Mercy

---

Nurse Presentations

Nursing

---

2-12-2019

### The Journey of Implementing a Pediatric Essential Oil Program

Elizabeth Edmundson

*Children's Mercy Hospital, eedmundson@cmh.edu*

Tiffany Kim

*Children's Mercy Hospital, tekim@cmh.edu*

Let us know how access to this publication benefits you

Follow this and additional works at: [https://scholarlyexchange.childrensmercy.org/nursing\\_presentations](https://scholarlyexchange.childrensmercy.org/nursing_presentations)



Part of the [Lipids Commons](#), [Organic Chemicals Commons](#), and the [Pediatric Nursing Commons](#)

---

#### Recommended Citation

Edmundson, Elizabeth and Kim, Tiffany, "The Journey of Implementing a Pediatric Essential Oil Program" (2019). *Nurse Presentations*. 1.

[https://scholarlyexchange.childrensmercy.org/nursing\\_presentations/1](https://scholarlyexchange.childrensmercy.org/nursing_presentations/1)

This Book is brought to you for free and open access by the Nursing at SHARE @ Children's Mercy. It has been accepted for inclusion in Nurse Presentations by an authorized administrator of SHARE @ Children's Mercy. For more information, please contact [hlsteel@cmh.edu](mailto:hlsteel@cmh.edu).

# The Journey of Implementing a Pediatric Essential Oil Program

Liz Edmundson, PhD, RN, NE- BC  
Tiffany Kim, RN, BSN, CPN

2019 Magnetizing KC: Celebrating the Voice of the Clinical Nurse



© The Children's Mercy Hospital, 2017



# Objectives

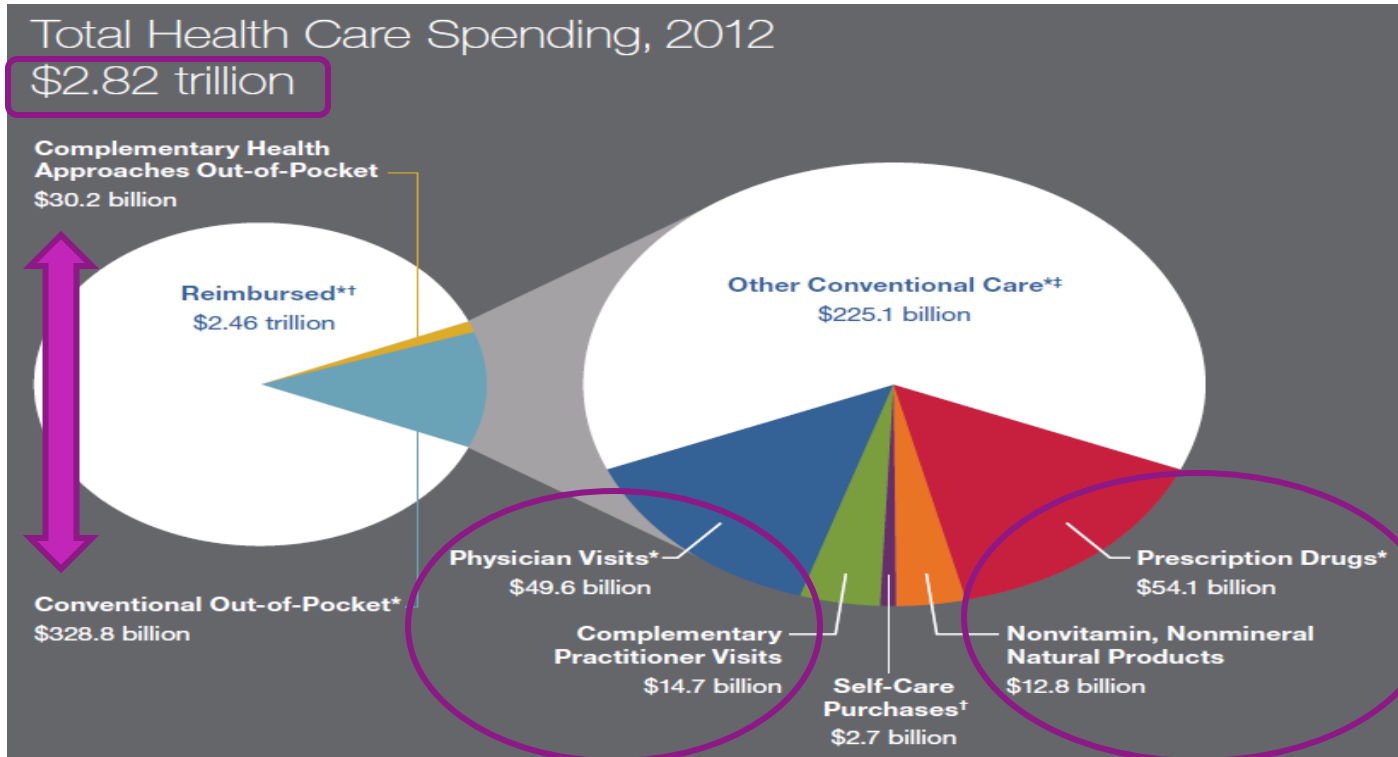
- Why Essential Oils?
- Getting Started
- Background of Essential Oils
- Implementation of Essential Oil patches
- Implementation and Outcomes

# Why Essential Oils?

- Use of Complementary and Alternative Medicine (CAM)
- Growing expectations of our patients and families
- Staff request for standardized process

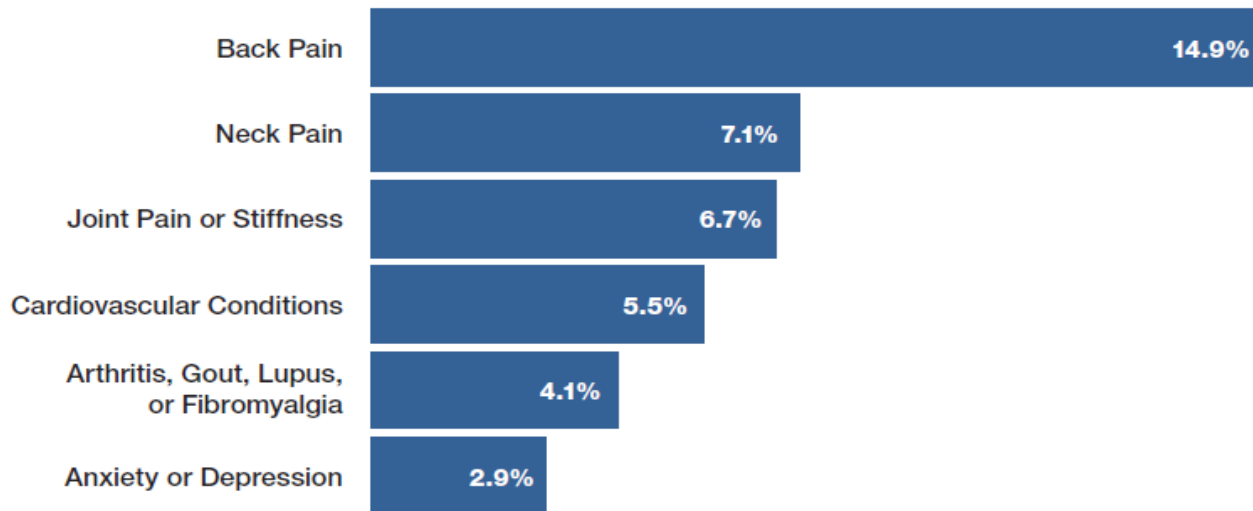


# Centers for Disease Control- 2012 survey



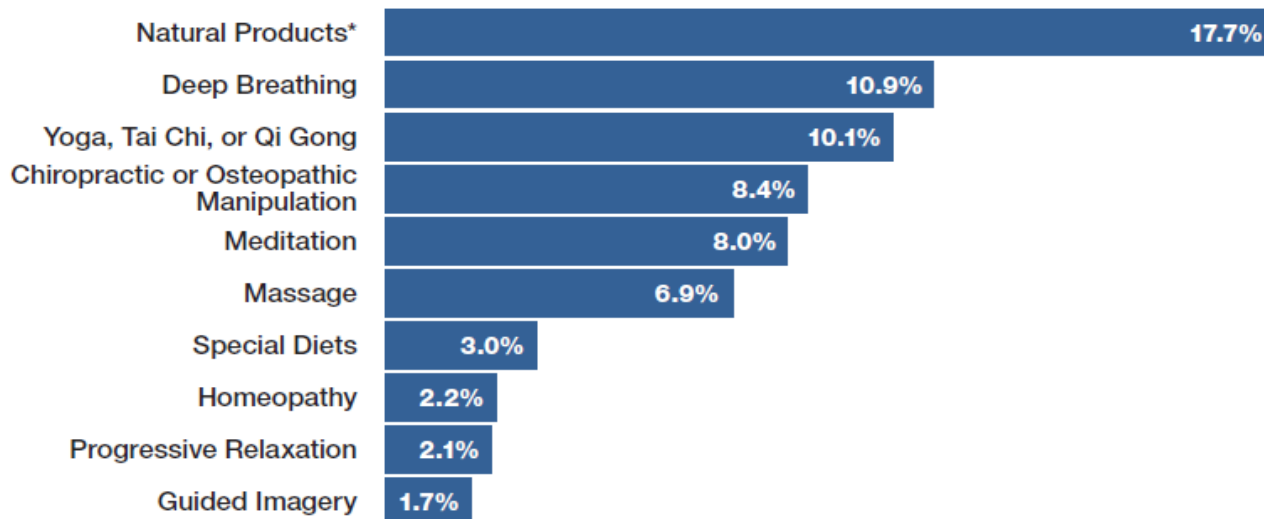
# CDC survey continued

Diseases/Conditions for Which Complementary Health Approaches  
Are Most Frequently Used Among Adults—2012\*\*



# CDC survey continued

## 10 Most Common Complementary Health Approaches Among Adults—2012



# Why Essential Oils?

- Use of Complementary and Alternative Medicine (CAM)
- Growing expectations of our patients and families
- Staff request for standardized process





**“The children of Missouri and Kansas  
welcome you to THEIR hospital.”**



# Non Pharmacologic toolkit

- Acupuncture/Acupressure
- Aromatherapy/Essential Oils
- Biofeedback
- Distraction
- Art Therapy
- Pet Therapy
- Music Therapy
- Child Life Specialists
- Hypnosis
- Meditation
- Massage Therapy
- Guided Imagery
- Care Channel™
- Comfort Promise
- Sleep, hydration, ice/heat, healthy eating, humor, stress management, reading, religion, TV/Movies
- Apps: Breathing2Relax  
Healing Buddies  
Comfort Kit

# Why Essential Oils?

- Use of Complementary and Alternative Medicine (CAM)
- Growing expectations of our patients and families
- Staff request for standardized process



# Getting Started

## Essential Oils Champions

Bedside Nursing

Nursing Informatics

Nursing Education

Pain Management Nursing

Massage Therapists

Child Life Specialists

Physical Therapy

Nursing Leadership

## Ad hoc Champions

Pharmaceuticals & Therapeutics committee

Medical Director, Comprehensive Pain Management

Administrative Nursing Leadership

Purchasing



# History

- Essential oils have been used for centuries
- Advances in conventional medicine and pharmaceuticals led to a decreased use of essential oils
- In the mid 20th century, use of essential oils began to re-emerge



# Facts about Essential Oils

- Contains some intrinsic risk
- Not currently regulated by the FDA
- Can be safe when used correctly in accordance with established policies and procedures following adequate training

# NOT As Seen on TV

- The commercial marketing of essential oils has become common (Facebook, YouTube, and social marketing) which has resulted in increased use and acceptance by the public without having all of the knowledge to the risks
- Clinical aromatherapy is different from recreational fragrance or using synthetically produced fragrances
- There is no data showing measurable clinical benefit from the use of synthetically produced essential oils

# Definitions

## Aromatherapy

- Is the controlled, intentional use of essential oils for specific, measurable, clinical outcomes
- Is directed by an individual that has attained extensive education and credentialing in the therapeutic use of essential oils

**\*\*Performed by staff trained in aromatherapy\*\***

## Use of Essential Oils via direct inhalation patch

- Is the clinical application of a specific plant essential oil(s) by qualified healthcare providers

**\*\*Can be performed by licensed staff who have completed competency training\*\***

Essential oils at Children's Mercy are delivered by **direct inhalation patch** only.



# Considerations

- The use of essential oils is not meant to replace medications or medical treatments
- Children < 3 years of age or < 20 kg are excluded from use of essential oils

## **The selection of essential oil is based upon:**

- assessment of applicable comfort concern
- determination of the patient's desire to use
- preference of the patient when more than one essential oil is available



# Preloaded Essential Oil Patch

CMH has four approved essential oils via direct inhalation patch:

Lavender

INHALATION PATCH



Alleviates anxiety or stress and promotes relaxation.

100% pure *Lavandula Angustifolia* essential oil.

Peppermint

INHALATION PATCH



Eases congestion, quiets headache and may provide relief from PMS symptoms.

100% pure *Mentha Piperita* essential oil

Mandarin

INHALATION PATCH



Calms nausea, indigestion and stomach disorders.

100% Pure *Citrus Reticulata* essential oil

Spearmint

INHALATION PATCH



Energizing and uplifting scent that relieves fatigue.

100% pure *Mentha Spicata* essential oil

# Comfort Concerns

Approved essential oils and the indicated comfort concern



Comfort Concern	Essential oil options
Upset stomach	Mandarin* ( <i>Citrus reticulata</i> ) Peppermint** ( <i>Mentha piperita</i> ) Spearmint ( <i>Mentha spicata</i> )
Muscle tension	Lavender ( <i>Lavendula angustifolia</i> ) Peppermint** ( <i>Mentha piperita</i> )
Irritability and restlessness	Lavender ( <i>Lavendula angustifolia</i> ) Mandarin* ( <i>Citrus reticulata</i> )
Urinary retention	Peppermint** ( <i>Mentha piperita</i> ) Spearmint ( <i>Mentha spicata</i> )

\* Mandarin- avoid if allergic to citrus

\*\* Peppermint- avoid with history of G6PD, epilepsy, or cardiac fibrillation



# General Contraindications

- Nickel allergy (the patch is **NOT** MRI safe) 
- Allergy/sensitivity to specific essential oil or its botanical substance (i.e. citrus)
- Poorly controlled asthma/active wheezing 
- History of G6PD, seizure disorder/epilepsy, cardiac fibrillation, uncontrolled hypertension

# Procedure

- Apply only 1 individual patch to the patients skin or clothing below the right or left clavicular notch
  - *Exception: Per patient request or in the presence of cognitive impairments or sensory difficulties, place the patch near the bedside, out of the patients reach*
- Remove every 4 hours
- Replace if patient desires
- Remove prior to discharge



# Patient and Family Education

## The Use of Essential Oils for Comfort

Children's Mercy wants you/your child to be as comfortable as possible.

We would like to offer you/your child an \_\_\_\_\_ essential oil patch.  
(name of essential oil)

Some people with \_\_\_\_\_ have felt more comfortable when they smell  
(comfort concern)  
this essential oil. Prior to the use of the essential oil patch, we want you to be informed that  
the safety and efficacy of essential oils have not been proven and that essential oils are not  
regulated by the Food and Drug Administration (FDA).

**Children's Mercy has developed a policy about how essential oils may be used in our hospital.  
Below are some key points from that policy:**

The patch is the only form of essential oils use that may be used in our hospital.

Some people have experienced headaches, dizziness, breathing difficulties, seizures, or nausea when using essential oils. If you or your child have any of these problems the patch will be taken off.

The patch will be placed on your child's gown or skin right below the neck. The patch can be a choking hazard. Please make sure to know where the patch is placed and make sure your child does not play with it or place it in their mouth.

The patch stays on for four (4) hours but if at any time you/your child want to stop using the patch please let us know.

If you/your child find comfort in using this patch, we can replace it every four hours. We will remove the patch prior to your child's discharge.

This essential oil patch is being used in conjunction with your/your child's ordered medical treatments.

# Documentation

## Initiating essential oils

- Provider approval will be obtained prior to discussing essential oils with patient/family
- Document the providers approval of the use of essential oils, the essential oil patch used, indication, patient tolerance/re-assessment of symptoms, and any side effects/adverse effects in the Nursing Activities section of EHR

# EHR Documentation

## Essential Oil fields in Nursing Activities I-view

Essential Oils	
Provider Approval Obtained	
Name of Provider	
Essential Oil Indication	
Essential Oil Tolerance/Assessment	
Essential Oil Activity	
Essential Oil Patch Location	

Indication field is multi select and opens each specific essential oil field conditionally--

Essential Oils	
Provider Approval Obtained	
Name of Provider	
Essential Oil Indication	Essential Oil Indication <span>✕</span>
Essential Oil Tolerance/Assessment	Upset stomach
Essential Oil Activity	Muscle tension
Essential Oil Patch Location	Irritability and restlessness
	Urinary retention
	Patient request



# Based on indication selected, the specific essential oils for that indication will display

Essential Oils	
Essential Oil Indication	Upset sto...
Type of Essential Oil- Upset Stomach	Type of Essential Oil- Upset Stoma... X
Essential Oil Tolerance/Assessment	Mandarin (citrus reticulata)
Essential Oil Activity	Peppermint (menthe piperita)
Essential Oil Patch Location	Spearmint (menthe spicata)

Essential Oils	
Essential Oil Indication	Muscle te...
Type of Essential Oil- Muscle Tension	Type of Essential Oil- Muscle Tensi... X
Essential Oil Tolerance/Assessment	Lavender (lavendula angustifolia)
Essential Oil Activity	Peppermint (menthe piperita)
Essential Oil Patch Location	

Essential Oils	
Essential Oil Indication	Irritability...
Type of Essential Oil- Irritability	Type of Essential Oil- Irritability X
Essential Oil Tolerance/Assessment	Lavender (lavendula angustifolia)
Essential Oil Activity	Mandarin (citrus reticulata)
Essential Oil Patch Location	

Essential Oils	
Essential Oil Indication	Urinary r...
Type of Essential Oil- Urinary Retention	Type of Essential Oil- Urinary Retenti... X
Essential Oil Tolerance/Assessment	Peppermint (menthe piperita)
Essential Oil Activity	Spearmint (menthe spicata)
Essential Oil Patch Location	

Essential Oils	
Essential Oil Indication	Patient re...
Type of Essential Oil	Type of Essential Oil X
Essential Oil Tolerance/Assessment	Lavender (lavendula angustifolia)
Essential Oil Activity	Mandarin (citrus reticulata)
Essential Oil Patch Location	Peppermint (menthe piperita)
	Spearmint (menthe spicata)



# EHR Documentation

The activity field will fire the q 4 hour nursing task to cue patch removal and re-assessment

Essential Oils	
Provider Approval Obtained	
Name of Provider	
Essential Oil Indication	
Essential Oil Tolerance/Assessment	
Essential Oil Activity	Essential Oil Activity ✕
Essential Oil Patch Location	On
	Off
	Replaced

# EHR Documentation

Documentation of patient response to nursing intervention is selected from the following dropdown tolerance/re-assessment menu

Essential Oils	
Provider Approval Obtained	
Name of Provider	
Essential Oil Indication	
Essential Oil Tolerance/Assessment	Essential Oil Tolerance/Assessment ✕
Essential Oil Activity	Symptoms improved
Essential Oil Patch Location	Symptoms unchanged
	Undesirable effects
	Other

# Discharge instructions

(available in Depart “Essential Oil Discharge Information”)

## Essential Oil Discharge Information

(Before you go home, your essential oil patch must be removed).

During your visit we used an \_\_\_\_\_ essential oil patch for comfort.  
(name of essential oil)

We hope that your child had a good response to this comfort measure.

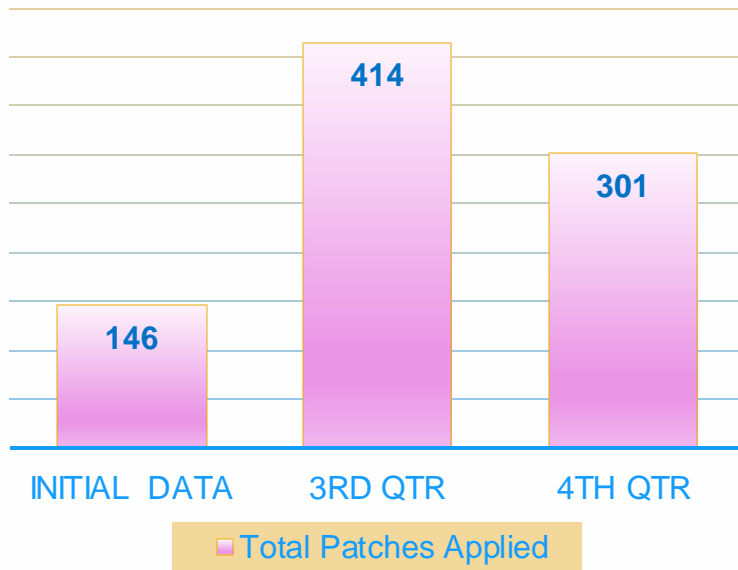
While there are other commercial essential oil products available that may report similar comfort measures, these products have unique risks and are not advocated for use by Children’s Mercy.

Talk to your child’s primary care provider if you want to continue to use essential oils. Always tell your child’s primary care provider if you use essential oils or other natural products in your home.

Call your doctor or the **Children’s Mercy Information Line at (816) 234-3188** if you have questions or concerns about essential oil patches or your child’s treatment.

# Implementation Data

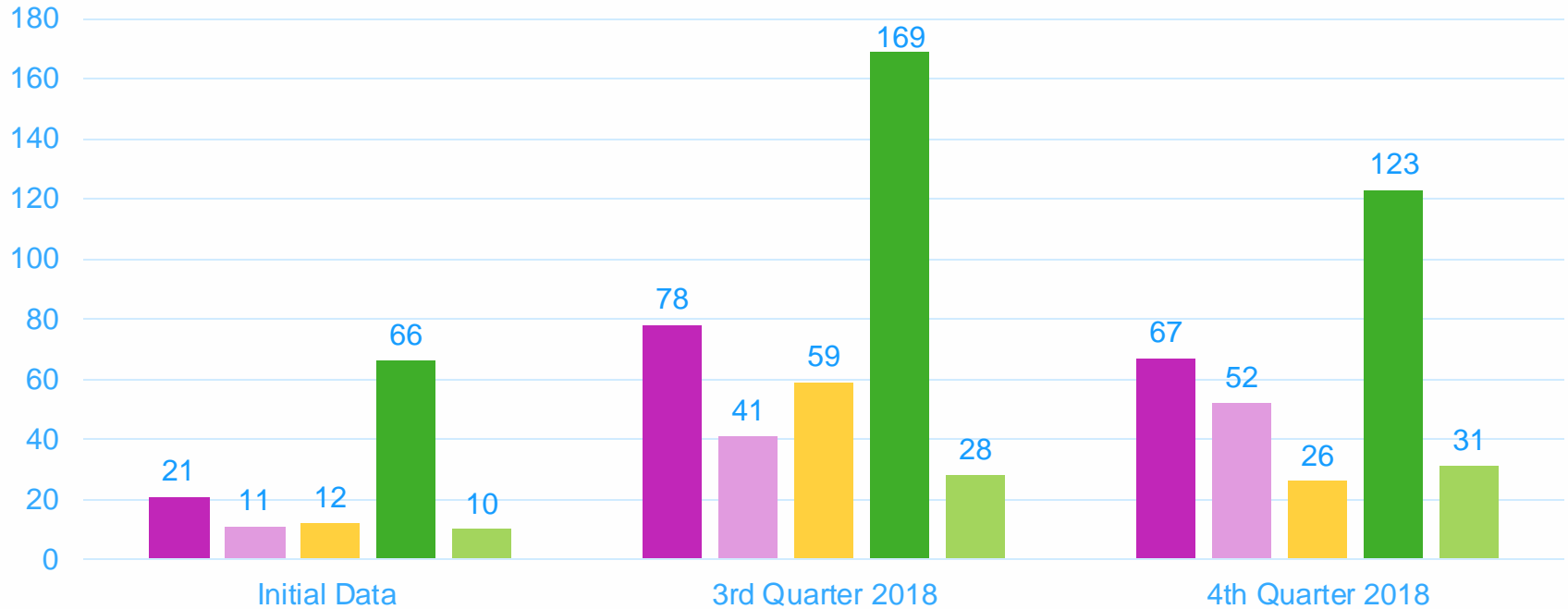
## Total Patches Applied



## Nov. 2017 – Dec. 2018

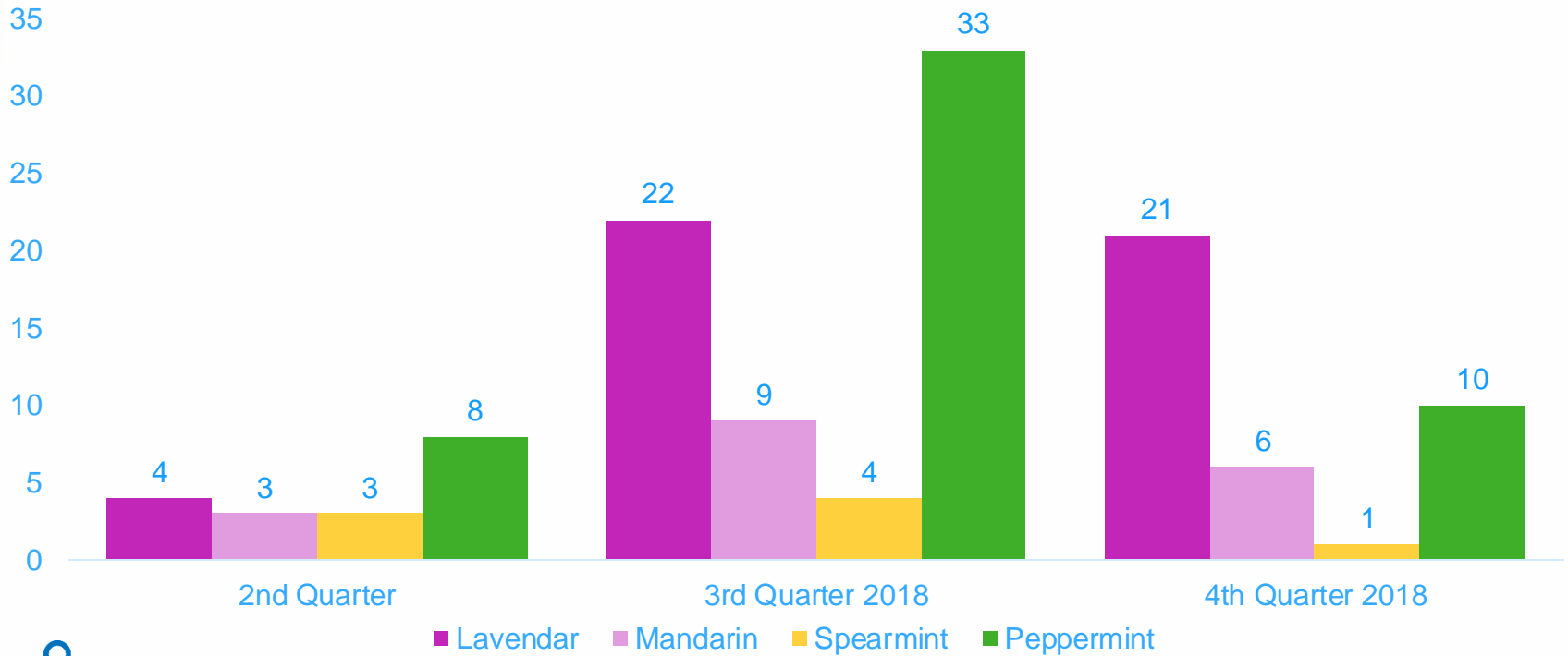
- Over 1,000 patients
  - Indication
  - Type of essential oil
  - Outcomes

# Essential Oil Indication



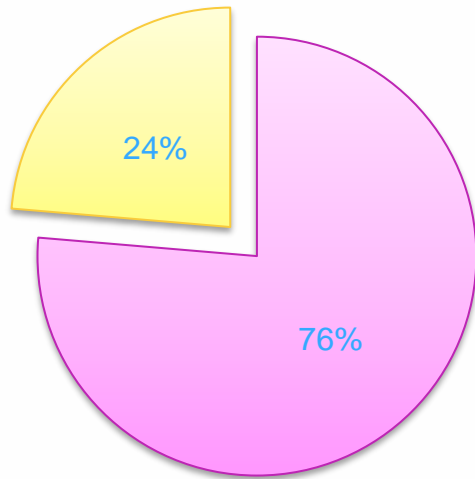
■ Irritability and Restlessness ■ Muscle tension ■ Patient Request ■ Upset Stomach ■ Urinary Retention

# Type of Essential Oil

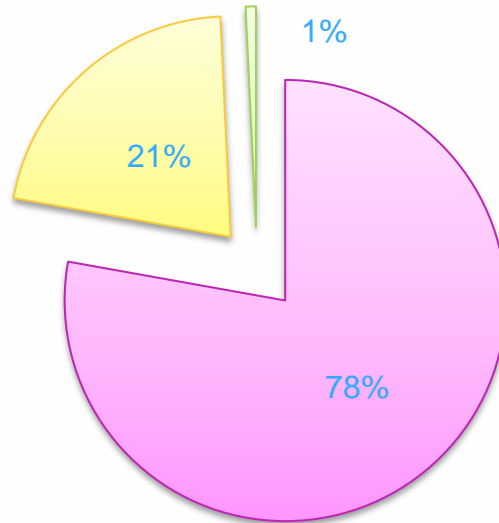


# Essential Oil Outcomes

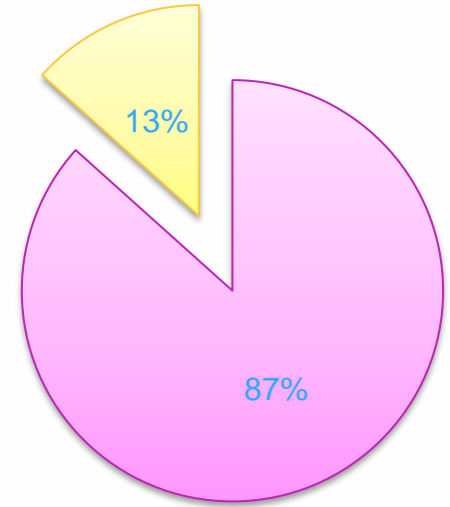
Initial Data



3rd Quarter 2018



4th Quarter 2018



■ Symptoms Improved   ■ Symptoms Unchanged   ■ Undesirable Effect



# RN Essential Oil Comments

- Symptoms improved when used with pain meds and ice
- Pt states she feels better but reports same VAS (pain score) of 6/10
- Patient requested patch to be removed
- Patient likes Essential Oils
- Starting to help with relaxation and promote good sleep
- The patients mom was ecstatic since she used oils for her kids at home
- Increased activity level and talking while engaged in physical activity within 20 minutes of applying patch. Notable desirable effect of decreased opposition. Increased attention to tasks in small therapy room

# References

- American Holistic Nurses Association (AHNA). <http://www.ahna.org>
- Aromatherapy Registration Council (ARC) . <http://www.aromatherapycouncil.org>
- Buckle, J. (2015). *Clinical Aromatherapy: Essential Oils in Healthcare*. (3<sup>rd</sup> Ed.) St. Louis, Missouri: Elsevier.
- Maddocks-Jennings, W. & Wilkinson, J. (2004). Aromatherapy practice in nursing: literature review. *Journal of Advanced Nursing*, 48(1), 93-103.
- National Association for Holistic Aromatherapy (NAHA). <http://www.naha.org>
- Price, S. & Price, L. (2012). *Aromatherapy for Health Professionals*. (4<sup>th</sup> Ed.) New York, New York: Churchill Livingstone.
- Tisserand, R. & Young, R. (2014). *Essential Oil Safety*. (2<sup>nd</sup> Ed.) New York, New York: Churchill Livingstone.
- University of Minnesota Center for Spirituality & Healing learning module “Clinical Aromatherapy”  
[http://www.cshmodules.umn.edu/Integrativehealingpractices/aroma\\_rlo\\_sq\\_splash.html?runningtitle=Aromatherapy&AUD=CSH&QUIZ=1&PREVIEW=NO&SCORE\\_REPORT\\_URL=https%3A//www.csh.umn.edu/education/online-learning-modules-resources/online-learning-modules](http://www.cshmodules.umn.edu/Integrativehealingpractices/aroma_rlo_sq_splash.html?runningtitle=Aromatherapy&AUD=CSH&QUIZ=1&PREVIEW=NO&SCORE_REPORT_URL=https%3A//www.csh.umn.edu/education/online-learning-modules-resources/online-learning-modules)

