Educating Providers: Timely post-operative pain management in a Level IV Neonatal Intensive Care Unit (NICU)

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Background

- NICU patients often encounter painful procedures and can have significant short and long-term consequences from inadequately treated pain.
- Adequate pharmacological pain management while minimizing risks is paramount.
- Our participation in the CHNC CIQI collaborative “Erase Pain” to improve management of post-op pain in neonates, provided the infrastructure to introduce an institutional QI project.

SMART Aim

Increase the percentage of patients receiving acetaminophen within one hour after surgery to greater than 70% by July 2020.

Design

- Standardization: multidisciplinary team developed pain treatment algorithms (Fig. 1) and postop order plans (Fig. 2)
- Physician, NNP and RN education through mandatory educational sessions and newsletter
- Process measures included compliance with the use algorithm and order plan.
- Baseline Period: Jan-Jul 2019
- Project Period: Aug 2019-Aug 2020

Results

- Provider compliance with the algorithm improved from a baseline of 16.7% of patients before education to 77.3% after intervention.
- Acetaminophen administration within the 1st hour postop improved from a baseline of 41% to 74.7%.
- The percentage of patients receiving acetaminophen within the 1st hour post op was greater than 70% by July 2020.

Conclusion

- Educating providers about the importance of discussing postop pain and administering multimodal analgesia is effective in improving ordering practices and timely acetaminophen administration.
- Use of a postop pain algorithm reduces opiate exposure, which was monitored as a balancing measure.