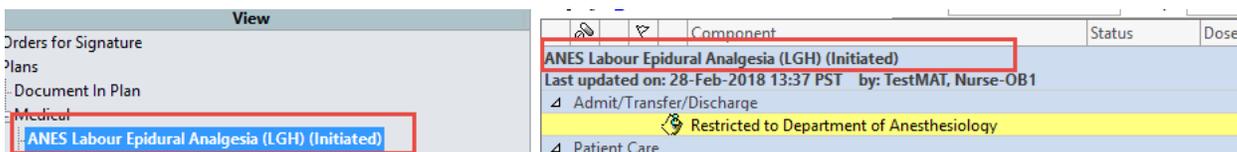


Maternity – Document an Epidural

Epidural Requested by Patient

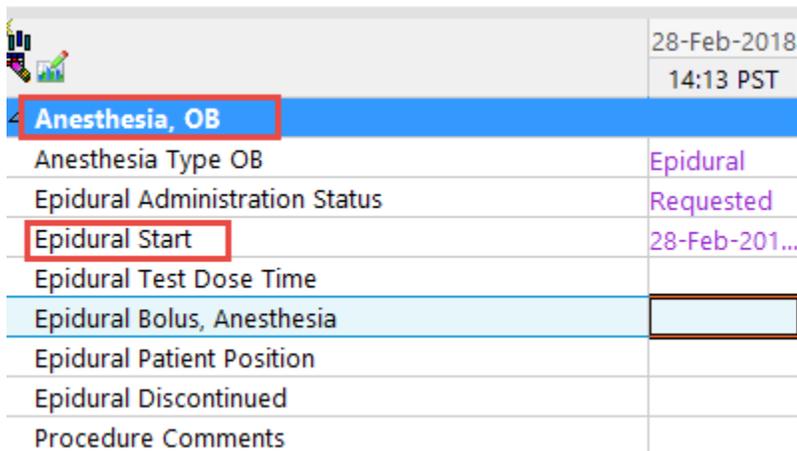
1. Inform OB or Anesthesia Provider of request as per site policy.
2. Document in the Provider Notification section in the Labour and Delivery Band.
3. Once Epidural request ordered by Anesthesia in the **ANES Labour Epidural Analgesia Powerplan**.



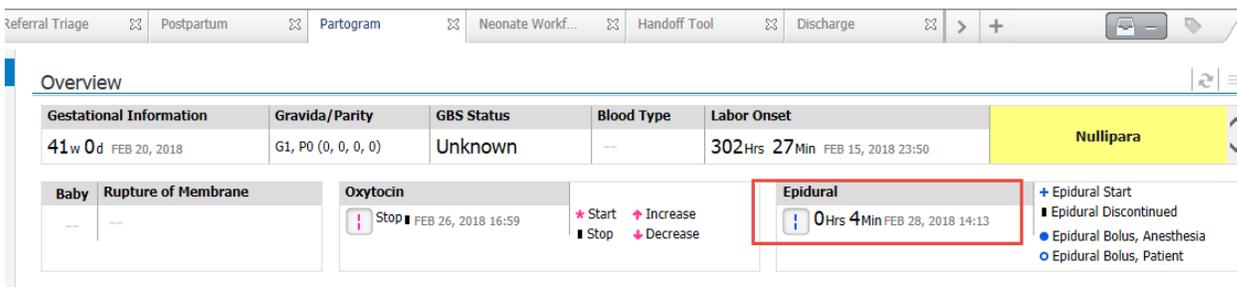
4. Retrieve ordered epidural medications from Omnicell.

Epidural Documentation

5. Document Epidural Procedure in Anesthesia, OB Section. This will also show the epidural on the Partogram when you document "Epidural Start" time.



6. On the Partogram page, you can view how long the epidural has been running.



- Document start of epidural infusion and any changes to the infusion in MAR.



IMPORTANT: The Epidural Pump is not interfaced with Cerner.

- In MAR under the Table of Contents (TOC) sign the medication using MAW (Medication Administration Wizard).
- If you need to change the rate, go back to MAR and sign it from here:

Charting for: CSTMATGOLIVE, APRIL

BUpivacaine-fentanyl 0.08%-2 mcg/mL epidural (maternity) 100 mL Change Order Version

6 mL/h starting rate, 0 mL/h minimum rate, 12 mL/h maximum rate, 0 mL intermittent bolus, 0 min to first bolus, 0 min bolus frequency, 8 mL PCEA dose, 8 min PCEA lockout interval, max PCEA doses/h: 3, pump type: CADD Solis, therapy: epidural obstetric...

27-Feb-2018 20:45 PST - 28-Feb-2018 20:45 PST

| | | |
|--|--------------------------|---------|
| | 28-Feb-2018 08:38 PST | |
| | Begin Bag | Bag # 1 |
| | Site Change | Lumbar |
| | Infuse | |
| | Bolus | |
| | Rate Change | 8 mL/h |

Double click in this cell

Yes No BUpivacaine-fentanyl 0.08%-2 mcg/mL epidural (maternity) 100 mL Change

***Performed date / time :** 28-Feb-2018 0838 PST Comment...

***Performed by :** TestMAT, Nurse-OB1 Unchart...

Witnessed by: Apply

***Bag # :** 1

***Site :** Lumbar

***Volume (mL) :** 100

***Rate (mL/h) :** 8

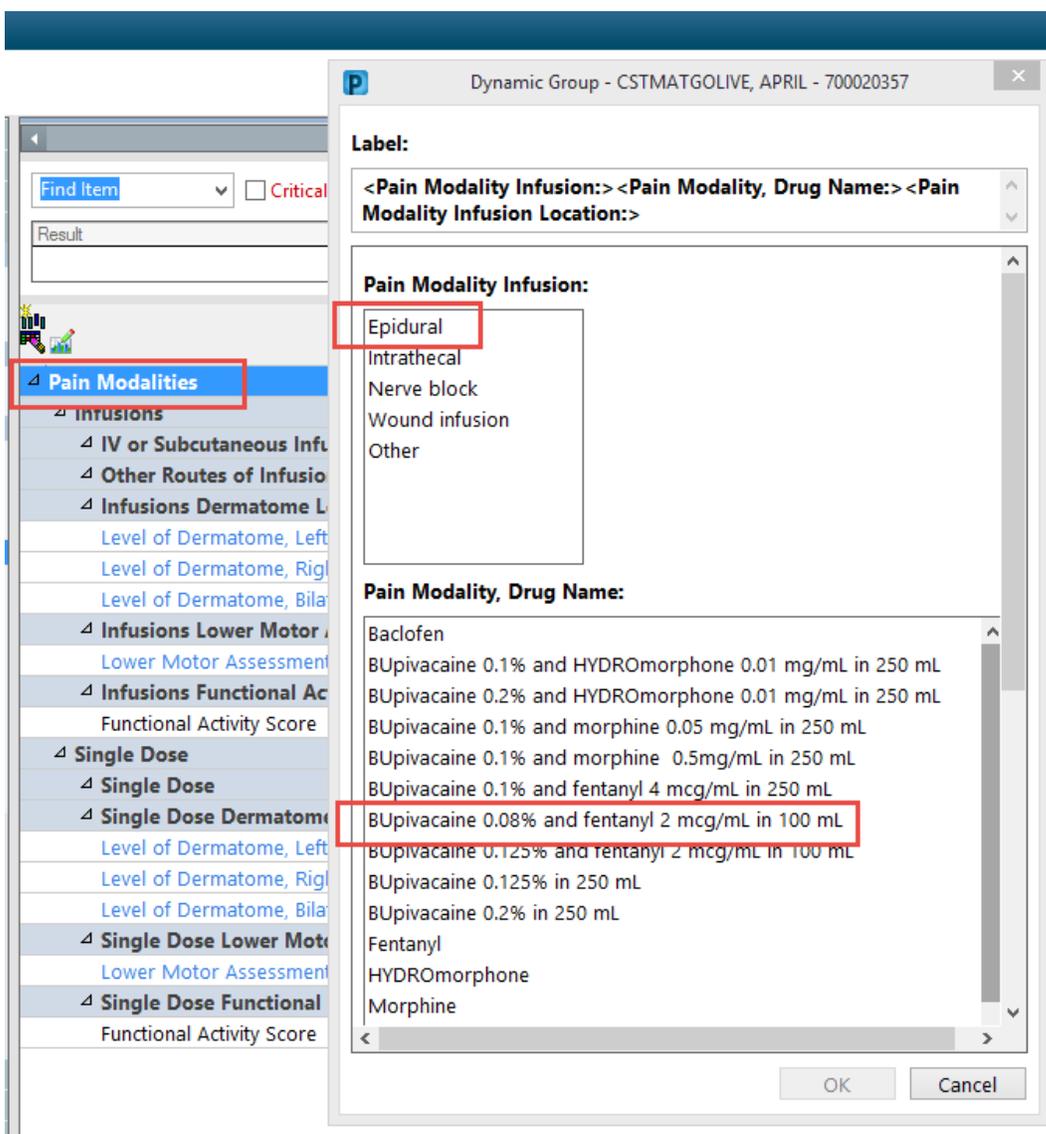
Begin Bag

In Progress

10. Ensure that this is still Bag # 1 if you are still using the same bag and update the Rate in the Rate (ml/h) cell.
11. If you have changed the bag and it is still the same order, this would be Bag # 2.
12. If you had to change the bag to a stronger dose, then this would be a new order when you sign it.

Pain Modalities Section

13. In Pain Modalities, go to “Other Routes of Infusion” Dynamic Group to complete further documentation on the Epidural (This where you will document your hourly documentation).



| | |
|---|-------|
| <div style="border: 2px solid red; padding: 2px;"> 1 Pain Modalities </div> | |
| <div style="border: 1px solid gray; padding: 2px;"> ▾ Infusions </div> | |
| <div style="border: 1px solid gray; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> ▾ IV or Subcutaneous Infusions </div> </div> | |
| <div style="border: 1px solid gray; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> ▾ Other Routes of Infusion </div> </div> | |
| <div style="border: 2px solid red; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> ▾ <Epidural BUpivacaine 0.08% and fentanyl... </div> </div> | |
| Infusion Type | |
| Verification Type | |
| Pump Related Activity | |
| Verified Pump Settings with Orders | |
| Adverse Effects | |
| Continuous Rate | 8 |
| Continuous Rate Unit of Measure | mL/hr |
| Patient Controlled Setting | |
| Program Intermittent Bolus | |
| Clinician Bolus Given | |
| Pump Cleared Total | |
| Pump Cleared Total Unit of Measure | |
| Number of Doses Attempted | |
| Number of Doses Delivered | |
| Number of Doses Denied | |
| Pump ID Number | |
| Tubing Care/Status | |
| Site Condition | |
| Dressing Activity | |
| Dressing | |
| Dressing Condition | |
| Drainage Amount | |
| Drainage Description | |
| Unexpected Events | |

14. Document the Patient assessment in the Pain Modalities Section, this documentation will include Dermatome and Motor assessments.

15. To hide the view and only document the Dermatomes and Motor Assessment click on Infusions and it will shrink the other sections. To expand, click on Infusions again.

| | |
|--|--|
| <ul style="list-style-type: none"> ▾ Pain Tool Used ▾ Pain Modalities <ul style="list-style-type: none"> ▸ Infusions ▾ Single Dose <ul style="list-style-type: none"> ▾ Single Dose ▾ Single Dose Dermatome Level Assessment <ul style="list-style-type: none"> Level of Dermatome, Left Level of Dermatome, Right Level of Dermatome, Bilateral ▾ Single Dose Lower Motor Assessment <ul style="list-style-type: none"> Lower Motor Assessment Scale ▾ Single Dose Functional Activity <ul style="list-style-type: none"> Functional Activity Score | |
|--|--|

Vital Signs

16. If using Fetalink, be sure the results are transferred to the chart, verify, and sign off Vital signs in iView.
17. If not using not using Fetalink, manually enter vitals in the Vital Signs Section in the Labour and Delivery Band.

Intake and Output

18. Rates from the Infusion bag will pull through to the Intake and Output Band. Double click in the cell and verify before signing.

| | | | | |
|---|---|----------------------|----------------------|----------------------|
| <ul style="list-style-type: none"> OB Triage Antepartum Antenatal Testing Labour and Delivery Newborn Delivery Data OB Recovery and Postpartum OB Special Assessment OB Systems Assessment OB Education Intake And Output Intake <ul style="list-style-type: none"> Continuous Infusions Medications Chest Tubes | Tuesday, 27-February-20 | | | |
| | Today's Intake: 0 mL Output: 0 mL Balance: 0 mL Yesterday's Intake: 0.5 mL | | | |
| | | 12:00 - 12:59 PST | 11:00 - 11:59 PST | 10:00 - 10:59 PST |
| | Intake Total | | | |
| | Continuous Infusions | | | |
| | BUpivacaine-fentanyl 0.08%-2 mcg/mL epidural (maternity) 1... mL | | | |
| | | 8 | 8 | |
| | oxytocin additive 30 unit + sodium chloride 0.9% (NS) titr... mL | | | |

Discontinue the Epidural

19. To discontinue the epidural, discontinue the Epidural Powerplan. Right click on the **ANES Labour Epidural Analgesia Powerplan** and select Discontinue with no co signature.

| Component | Status | Dose ... | Details |
|---|---------|----------|--|
| ANES Labour Epidural Analgesia (LGH) (Initiated) | | | |
| Last updated on: 28-Feb-2018 13:37 PST by: TestMAT, Nurse-OB1 | | | |
| Admit/Transfer/Discharge | | | |
| Restricted to Department of Anesthesiology | | | |
| Communication Order | Ordered | | 28-Feb-2018 13:36 PST, Do not give any Opioids, CNS Depressants, and ... |
| Notify Treating Provider | Ordered | | 28-Feb-2018 13:36 PST, If patient is receiving LMWH, other anticoagulat... |
| Notify Treating Provider | Ordered | | 28-Feb-2018 13:36 PST, If BP falls greater than 20 mmHg below resting s... |
| Vital Signs | Ordered | | 28-Feb-2018 13:36 PST, Stop: 28-Feb-2018 13:36 PST, As per guideline Upon epidural initiation or any physician epidural top-up |
| External Fetal Heart Monitor | Ordered | | 28-Feb-2018 13:36 PST, Stop: 28-Feb-2018 13:36 PST, As per guideline Upon epidural initiation or any physician epidural top-up |
| Motorsensory Assessment | Ordered | | 28-Feb-2018 13:36 PST, As per guideline Upon epidural initiation or any physician epidural top-up |
| Respiratory Rate | Ordered | | 28-Feb-2018 13:36 PST, Stop: 28-Feb-2018 13:36 PST, If Respiratory Rate i... |
| Sedation Assessment | Ordered | | 28-Feb-2018 13:36 PST, If Sedation Score (POSS) greater than 3: - Stop PCA and / or Epidural infusion and / or IV Lidocaine and / or IV K... |
| Local Anesthetic Toxicity Assessment | Ordered | | 28-Feb-2018 13:36 PST, Assess for systemic side effects of local anestheti... |
| Bedrest | Ordered | | 28-Feb-2018 13:36 PST, Stop: 28-Feb-2018 13:36 PST |

20. Document when Epidural was discontinued in Anesthesia OB Section to stop it on the Partogram.

| Partogram | Neonate Workflow | Handoff Tool | Discharge | OB Quick Orders | | | | | | | | | | | |
|---|---------------------------------|--------------|---------------------------------|-----------------|-----------|----------------|---------|-----|---------------------------------|-----------|---|----------|----------|---|---------------------------------|
| <table border="1"> <thead> <tr> <th>Parity</th> <th>GBS Status</th> <th>Blood Type</th> <th>Labor Onset</th> <th>Nullipara</th> </tr> </thead> <tbody> <tr> <td>0 (0, 0, 0, 0)</td> <td>Unknown</td> <td>---</td> <td>302Hrs 32Min FEB 15, 2018 23:50</td> <td>Nullipara</td> </tr> </tbody> </table> | Parity | GBS Status | Blood Type | Labor Onset | Nullipara | 0 (0, 0, 0, 0) | Unknown | --- | 302Hrs 32Min FEB 15, 2018 23:50 | Nullipara | <table border="1"> <thead> <tr> <th>Oxytocin</th> <th>Epidural</th> </tr> </thead> <tbody> <tr> <td> Stop FEB 26, 2018 16:59 * Start ↑ Increase ■ Stop ↓ Decrease </td> <td> Discontinued FEB 28, 2018 14:21 </td> </tr> </tbody> </table> | Oxytocin | Epidural | Stop FEB 26, 2018 16:59 * Start ↑ Increase ■ Stop ↓ Decrease | Discontinued FEB 28, 2018 14:21 |
| Parity | GBS Status | Blood Type | Labor Onset | Nullipara | | | | | | | | | | | |
| 0 (0, 0, 0, 0) | Unknown | --- | 302Hrs 32Min FEB 15, 2018 23:50 | Nullipara | | | | | | | | | | | |
| Oxytocin | Epidural | | | | | | | | | | | | | | |
| Stop FEB 26, 2018 16:59 * Start ↑ Increase ■ Stop ↓ Decrease | Discontinued FEB 28, 2018 14:21 | | | | | | | | | | | | | | |