PREVENTING OPIOID ADDICTION IN OBSTETRICAL PATIENTS - EDUCATING NURSING PROFESSIONALS

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BACKGROUND

- Substance abuse disorders affect women across all racial, ethnic, & socioeconomic groups in rural, urban, and suburban areas.
- Perinatal substance abuse exposure has become an epidemic; rates have been rising dramatically each year.
- Misuse of prescriptions of illicit opioids among women of child-bearing age has dramatically increased over the last 30 years in the U.S.
- “Inadequate pain relief in the hours to months following childbirth can interfere with maternal-newborn bonding, feedings and increase the risk of postpartum complications.”

PURPOSE

- The purpose of this project was to determine baseline knowledge of Mother Baby Unit Nurses regarding opioid substance abuse and provide education to meet knowledge deficits.

REFERENCES

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METHODS

- Design: Evidence-based quality improvement.
- Sample: Mother Baby Unit RNs.
- Instrument:
  - 10 questions related to pain medication & narcotic administration in obstetrical patients.
  - Used as needs assessment & posttest.
- Procedure
  - Needs assessment used to determine specific education requirements.
  - Education at staff meetings, online & written pamphlets targeted to identified need.
  - A posttest to determine effectiveness of teaching.
  - Audits of patients use of narcotics pre, during & post-education.

RESULTS AND OUTCOMES

- Monthly medication audits on 30 patients (15 cesarean (C/S) and 15 vaginal (NSVD) deliveries done for 5 months (pre, during, post education).
- Post education audit results demonstrated increased use of non-narcotic pain administration for postpartum patients and reduced use of narcotics.
- MD medication order set recently implemented at SJH to provide specific orders for routine NSAID administration and the requirement for an order for continued narcotic administration.

IMPLICATIONS FOR PRACTICE

- Continue to decrease narcotic use post C/S & NSVD delivery patients with structured NSAID use.
- MD medication order set recently implemented with orders for routine NSAID administration and the requirement for an order for continued narcotic administration.
- Continue monthly audits – this is essential to assess nursing practice with medication administration.

CONCLUSIONS

- Effective pain management is a critical component in the care of obstetrical patients.
- Pain management change of practice occurred with assessment of nurses’ baseline knowledge of opioid and NSAID use and provision of education.
- Target goal achieved for administration of structured NSAIDS for obstetrical patients to lessen amount of opioids administered.