CONCLUSION

All persons experiencing pain have the right to expect appropriate management of their pain. Nurses must work through the stated issues and practice in accordance with established pain management standards. It is imperative that the licensed nurse works cooperatively and effectively to meet the goal of pain management in order to avoid patient harm and/or personal risk of licensure discipline by the Board.

MANAGEMENT: ROLE OF THE LICENSED NURSE

CARING FOR ALL EXPERIENCING PAIN

It is estimated that over 76 million Americans suffer from some form of pain. The effects of pain may diminish quality of life physically, emotionally, socially, spiritually and economically. Pain constitutes a dynamic and challenging aspect of health care that requires increased awareness and knowledge on the part of nurses. Nurses face issues involving pain and its management on a regular basis. Nurses are expected to address pain consistent with accepted standards. The nurse whose practice constitutes a substantial departure from established and customary standards of care or whose behavior presents danger to the public may risk disciplinary action by the Board of Nursing.

In its role of safeguarding the public health, safety and welfare, the Board has the responsibility to address the nurse’s role in pain management and treatment. Toward this end, the Board has identified four unique situations related to pain management for which guidance may be of benefit to the nurse.

The following issues are addressed in statements developed and adopted by the Board and are included in this informational packet:

1. The role of the licensed nurse caring for patients experiencing pain; and
2. The advanced practice registered nurse (APRN) prescribing for patients with pain
3. The practicing nurse experiencing and/or being treated for pain
4. The nurse with a chemical use disorder whose pain is managed with prescribed potentially addictive drugs

ROLE OF THE LICENSED NURSE CARING FOR PATIENTS EXPERIENCING PAIN INCLUDING THE ADVANCED PRACTICE REGISTERED NURSE (APRN) PRESCRIBING FOR PATIENTS WITH PAIN

The Idaho Board of Nursing believes it is essential that patients experience appropriate and effective pain management. Unrelieved pain can result in longer hospital stays, increased rates of re-hospitalization, increased outpatient visits and an individual’s decreased ability to function. Ineffective treatment of pain, including non treatment, under treatment, overtreatment and the continued use of inappropriate treatments, places patients at risk of harm or unnecessary suffering.

When caring for patients with pain, nurses may be intimidated by the complexity of pain management. They may be concerned about side effects of pain medications or fear that patients may become tolerant, physically dependent or addicted to these drugs through extended use. They may be concerned about how their own experiences with pain may cloud their judgment while caring for others.

The APRN caring for patients with pain may fear a practice environment where clinicians face possible regulatory or legal sanctions for over- or under -treating pain or for their particular prescribing practices. Additionally, APRNs may encounter patients exhibiting drug-seeking behavior that present a real safety threat to themselves, the nurse and others who may be present in the healthcare setting.

In order to effectively address the needs of patients experiencing pain, the licensed nurse, practicing within defined parameters consistent with...
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his/her level of education, demonstrated competence and category of licensure, must:

- Be knowledgeable about effective pain management
- Routinely assess all patients for the presence of pain
- Document all aspects of pain assessment and treatment
- Anticipate pain and effectively manage side effects of pain treatment
- Provide appropriate pain treatment and evaluation of the treatment
- Coordinate patient care/collaborate with other providers/care givers
- Teach/inform patients, family members and other care givers about pain management
- Be aware of the potential for patient abuse/misuse of pain medications and take appropriate steps to minimize risk
- Develop policies and protocols that provide for continuity and consistency in managing patients with pain
- Know and comply with state and federal laws regarding prescribing, dispensing and administering pain medications, including controlled substances
- Identify and eliminate barriers that inhibit or prevent appropriate pain treatment.

POSITION ON SAFETY TO PRACTICE: GUIDANCE FOR THE PRACTICING NURSE EXPERIENCING PAIN

One essential element of safe nursing practice is a nurse’s functional ability: the competence and reliability with which a nurse is able to practice at any given time.

The board is aware that nurses sometimes experience situations that may compromise their ability to safely practice for either the short or long term. Some of these situations involve personal or job-related stress, sleep deprivation, the normal effects of aging, and episodic or persistent health conditions, some of which may require pain management or the use of maintenance-level prescribed medication. The list is not exclusive.

Whether a nurse should continue active nursing practice when that practice may be compromised depends upon the nurse’s ability to function safely and effectively. The assessment of functional ability is an individualized process that does not lend itself to application of a set format based on select elements. On the contrary, assessment of functional ability requires active consideration of all relevant factors, such as diagnosis, prescribed treatment and situational events, as well as an evaluation of the impact of those factors on the individual being assessed.

Although constant evaluation of one’s ability to safely and competently practice nursing is the responsibility of each individual nurse, the Board of Nursing remains the ultimate decision maker. In some instances, it may be necessary for the board to require objective physical and/or functional assessment, using reliable psychometric instruments and methods administered by qualified licensed professionals. For example, even though an individual nurse might perceive that he is capable of safe practice, a neuropsychiatric assessment, done at the Board’s request, may indicate functional impairment.

Licensed nurses are accountable for assuring that their actions and behaviors meet all applicable standards at all times. This requires constant awareness of the demands of the job and a continual process of evaluation and assessment in order to make sure that the nurse is fit to practice and competent to safely perform those functions that fall within the defined scope of nursing practice and for which the nurse has accepted responsibility. Nurses who practice while not fit to do so may be subject to disciplinary action by the board including, among others, license suspension or revocation, remedial measures, or monitored practice.

Adopted by Board of Nursing: April 29, 2005

GUIDELINES FOR NURSES IN ACTIVE RECOVERY FROM A SUBSTANCE USE DISORDER WHO ARE PRESCRIBED CONTROLLED SUBSTANCES

Nurses who have been diagnosed as having a substance use disorder and who are prescribed narcotics for pain are at substantial risk of relapse and compromise of their recovery.

Because there may be times that the use of controlled substances becomes medically necessary, nurses in active recovery who are prescribed narcotics and other controlled substances, should:

- Discontinue active nursing practice until controlled substance use has been discontinued
- Develop a plan for management and eventual discontinuance of the prescribed drug use in consultation with the prescribing health care provider
- Continue to participate in established recovery activities
- Return to active practice only on recommendation of their primary care provider.

The Mission of the Board of Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety and welfare.