

Monitoring Sedation in Non-ventilated ICU Patients Receiving Opioid Analgesia

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Monitoring Sedation in Non-ventilated ICU Patients Receiving Opioid Analgesia

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Background/Triggers

- Opioid analgesia continues to be the primary pharmacologic intervention for managing pain in hospitalized patients
- Opioids therapy has well documented side effects; the most serious is unintended advancing sedation and subsequent respiratory depression
- Opioid-induced adverse events in post-operative patients significantly increase length of stay and costs of hospitalization
- Opioid induced respiratory depression is a decrease in the effectiveness of lung function after opioid administration
- A change in sedation level will generally precede respiratory depression
- Monitoring a patient's level of sedation may prevent the occurrence of opioid induced respiratory depression

Purpose/PICO

- **Project Purpose:** To identify a tool for sedation assessment of patients receiving opioid therapy
- **P-In non-ventilated ICU patients receiving opioid analgesia**
- **I-is the use POSS score**
- **C-compared to the RASS score**
- **O-more likely to increase nursing confidence in sedation assessment**

Evidence

- There agreement in the literature that a systematic assessment of a sedation level should be completed on patients receiving opioid therapy.
- Nurses are at the bedside and can be the best choice to assess sedation levels over time
- A simple and well-understood scale can provide common language for all health care providers
- The scale should lead nurses to make informed decisions to keep patients safe while receiving opioid therapy
- Two tools were chosen for comparison
 - The Pasero Opioid-Induced Sedation Scale
 - The Richmond Agitation-Sedation Scale
- While the POSS was developed specifically for the patient receiving opioid therapy there is not a depth of evidence to support its use.
- **The RASS scale is a validated sedation tool for the assessment of sedation in the ICU.**
- **One study was published that compared the use of both scales for sedation assessment for patients receiving opioid**
- **Study: Comparison of Sedation Scales for Reporting Opioid-Induced Sedation**
 - 96 medical surgical nurses were given a 25 question online survey where each nurse read a scenario and chose the best response in regards to sedation scoring
 - **Validity and reliability of 3 sedation scales was measured by evaluating the responses**
 - **RASS and POSS found to be the most reliable**
 - **POSS was identified as easiest to use.**

Methods

- **Develop an interview tool which will allow the nurse to assess the patient using both the POSS score and the RASS**
- **Interview nurses caring for the described patient population**
- **Compare sedation scores using POSS and RASS assessments**
- **Assess RN's comfort and perceived accuracy of each sedation assessment scale**

Outcomes

- **At the time of staff interviews network based education was in progress which directed staff to another process for sedation assessment**
- **Staff interviews were placed on hold as to not conflict with education**

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