

## Prescribing rights for registered nurses.

*“In a population of hospital patients with acute pain, is there any difference in adverse outcomes between patients who are prescribed paracetamol by a registered nurse and patients who are not?”*

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### Clinical Issue:

I came to choosing my clinical issue after last year on placement I was talking to my registered nurse preceptor and we were talking about paracetamol, which is a very common medication that we administered. I found it odd that as a registered nurse, you are unable to administer paracetamol without it being prescribed, even though paracetamol is widely available outside of the hospital setting without a doctor's prescription.

### Evidence and findings:

In hospital settings it is important to treat or maintain a low level of pain in patients, as pain can affect patients not only physically, but also emotionally. Successfully managing pain is a significant factor towards their recovery (Swift, 2015). International evidence suggests that untreated and unmanaged pain in hospitals is a significant issue. A study carried out in America by Bernhofer (2011) showed that 63-74% of patients in hospital had pain that was well controlled. This leaves up to 37% of inpatients that pain levels were not adequately controlled, which could be alleviated by taking simple analgesia. This showed that by increasing the availability of pain treatment would be beneficial to the patients. This could be achieved by giving registered nurses the right to prescribe paracetamol. By giving registered nurses the right to prescribe simple analgesia such as paracetamol it would provide numerous benefits such as increasing the nurses' skill and knowledge while also giving nurses the ability to treat a greater range of health conditions. Another advantage is that nurses are often in closer contact with patients than doctor so therefore are more in tune and au fait with the needs of the patients. This means that they can prescribe faster than a doctor who may not be on the bed side at the time (Wilkinson, 2015). Giving registered nurses the ability to prescribe analgesia may be cost saving (Creedon *et al.*, 2015) as to prescribe the medication would not require the time of a doctor, who is more costly and less available.

### About the clinical issue:

Acute pain is common in hospital inpatient settings. Due to the nature of the hospital settings, inpatients who come in with trauma, or post operatively experience pain. Acute pain can be described as an “important biological protective mechanism [that is used to] warn the body of injury or disease. ... [Acute pain] directs immediate attention to the situation, promotes reflexive withdrawal and fosters other actions that prevent further damage and enhance healing.” (Crisp *et al.*, 2013, p.1319). A common medication that is currently being used in New Zealand to help relieve acute pain is paracetamol. Paracetamol is easily accessible throughout New Zealand: it is sold ‘over the counter’ from places such as dairies, gas stations and online (kiwidrug, 2016).

### Recommendation:

Following a review of the literature, a recommendation has been developed related to nursing practice in New Zealand. This recommendation has the potential to be beneficial to the way that nurses practice in New Zealand in achieving a higher rate of patient satisfaction with the care that they receive and the positive outcomes it has for nurses. The recommendation that I have come up with is:

- To give registered nurses in New Zealand the right to prescribe simple analgesia such as paracetamol.

### References:

- Bernhofer, E. (2011). Ethics and Pain Management in Hospitalized Patients. *The Online Journal of Issues in Nursing*. Vol. 17 No. 1
- Crisp, J., Catherine, T., Douglas, C., & Reberio, G. (2013). *Fundamentals of Nursing*. 4<sup>th</sup> edition. NSW, Australia: Elsevier.
- Creedon, R., Byrne, S., Kennedy, J., & McCarthy, S. (2015). The impact of nurse prescribing on the clinical setting. *British Journal of Nursing*, 24(17), 878-885 8p. doi:10.12968/bjon.2015.24.17.878
- Kiwidrug. (2016). *Products*. Retrieved from <https://buy-paracetamol.kiwidrug.com/>
- Swift, A. (2015). *Pain management 3: The importance of assessing pain in adults*. Retrieved from <http://www.nursingtimes.net/clinical-subjects/pain-management/pain-management-3-the-importance-of-assessing-pain-in-adults/5090816.fullarticle>
- Wilkinson, J. (2015). Proposals for registered nurse prescribing: perceptions and intentions of nurses working in primary health care settings. *Journal of Primary Health Care*, 7(4), 299-308 10p.



### Rationale for choice of poster:

This evidence based literature review has been presented in the form of a poster as it has been recognised to be an effective way to present and communicate information by knowledge transfer. Posters have been proven to increase knowledge, change attitudes and/ or behaviours (Ward & Hawthorne, 1994). I chose a poster as it is a quick way for those interested to retrieve the information and see the key points. I chose the title 'prescribing rights for registered nurses' as it grabs attention and gives the reader an idea of what the poster is about. I put a picture of pills in the background as they bring colour to the poster and are related to the content.

### PECOT model:

To investigate this topic, I used the PECOT model to construct a research question.

PECOT stands for the population that is being studied, exposure, comparison, outcomes and time (Jackson, 2006).

PECOT categories	Information relating to question	Explanation
Population	Patients who are inpatients in hospital, who have acute pain.	Pain is a common condition in the hospital setting. Also, a hospital setting would allow easier follow-up.
Exposure/ Intervention	Patients who are prescribed paracetamol by registered nurses.	This research question will aim to find out if registered nurses prescribing paracetamol has significant adverse outcomes.
Comparison/ Control	Patients who are not prescribed paracetamol by registered nurses.	The control group will help us identify if patients prescribed paracetamol by registered nurses have more adverse outcomes compared to patients who are not prescribed paracetamol by registered nurses.
Outcome	Adverse Outcomes: E.g. liver damage, death, other side effects of paracetamol.	I want to know if registered nurses prescribing paracetamol has a greater rate of adverse outcomes.
Time	During the patients' stay in hospital.	In hospital, medication is distributed by registered nurses, and so this question is looking at the hospital inpatient setting.

I also used the following exclusion criteria: patients who cannot communicate, i.e. with dementia or non-English speaking, patients with existing liver conditions, and patients for whom paracetamol is explicitly contraindicated.

### References:

Jackson, R. (2006). The GATE frame critical appraisal with pictures. *Evidence- Bases Nursing*, 9(3), 68-71. Doi: 10.1136/ebn.9.3.68

Ward, K., & Hawthorne, K. (1994). Do patients read health promotion posters in the waiting room? A study in one general practice. *The British Journal of General Practice*, 44 (389), 583-585.