

ADVISORY
OPINION

OPINION: Analgesia by Catheter
Technique
ADOPTED: 1989
REVISED: 1991, 12/98, 4/04, 9/06,
5/07, 1/08, 5/10, 10/10,
4/13,6/14
TEMPLATE REVISED: 08/2016
REAFFIRMED: 01/1996, 08/2016

Analgesia by Catheter Technique

It is the opinion of the Nebraska Board of Nursing that it is within the scope of practice for a registered nurse to manage the care of non-pregnant patients receiving analgesic medication via catheter techniques (Epidural, Intrathecal, Intrapleural. or Perineural) for acute or chronic pain.

The RN may assume responsibility for patient care only after the anesthesia provider has placed the catheter, verified placement of the catheter, and administered an initial test dose of pain medication with the patient's vital signs remaining stable.

The decision to provide any nursing care should be based upon self-assessment of competency, following an assessment of the client and environment. A licensed nurse is accountable to be competent for all nursing care that he/she provides. Competence means the ability of the nurse to apply interpersonal, technical and decision-making skills at the level of knowledge consistent with the prevailing standard for the nursing activity being applied. Accountability also includes acknowledgment of personal limitations in knowledge and skills and communication of the need for specialized instruction prior to providing any nursing activity.

Advisory Opinions

The Nebraska Board of Nursing may choose to issue advisory opinions in accordance with the Nebraska Nurse Practice Act, Neb. Rev. Stat. 38-2216 (2). As such, advisory opinions are for informational purposes only and are non-binding. The advisory opinions may define acts, which in the opinion of the board, are or are not permitted in the practice of nursing. Nursing practice, however, is constantly evolving and advisory opinions can become outdated. Ultimately, Nebraska law and Board regulations require the licensee to provide nursing care services within parameters consistent with education, skills, experience, and current competence. Application of the [Decision-Making Model](#) is encouraged.

References

- American Association of Nurse Anesthetists (2003). *Provisions of Pain Relief by Medication Administered via Continuous Epidural, Intrathecal, Intrapleural, Peripheral Nerve Catheters, or Other Pain Relief devices.*
- American Nurses Association (1997). *Position Statement on the Role of the Registered Nurse (RN) in the Management of Analgesia by Catheter Techniques (Epidural, Intrathecal, Intrapleural, or Peripheral Nerve Catheters).*
- American Society of Anesthesiologists (2008). *The Role of Registered Nurses in the Management of Continuous Regional Analgesia.*
- American Society for Pain Management Nursing (2007). *Registered Nurse Management and Monitoring of Analgesia by Catheter Techniques.*