

North Dakota Board of Nursing

Practice Statements

Role of the Nurse in Pain Management

The North Dakota Board of Nursing seeks to safeguard the public's health and safety by providing guidance and regulation of the nursing profession including the profession's role in pain management. Accordingly, a balanced approach to pain management is required; one that addresses the potential for abuse without preventing clients from receiving the care they need and deserve. Therefore, the North Dakota Board of Nursing adopts this Practice Statement to assure health care providers, clients and their families that the policy of this Board supports, encourages, and expects competent comprehensive care for the treatment of pain across the lifespan.

Pain is one of the most common reasons clients seek medical attention, and is a symptom that is encountered by every health care provider. The American Pain Society estimates, 75 million people are partially or totally disabled by pain and 45% of all Americans seek care for persistent pain at some point in their lives. Health care professionals must be knowledgeable regarding effective and compassionate pain relief, while clients and their families should be assured such relief will be provided. Communication and collaboration between members of the healthcare team, the client and the family are essential in achieving adequate pain management. Ideally, the client directs the plan of care and the pain level to be achieved.

The North Dakota Nurse Practices Act Chapter 43-12.1, states that "Nursing" means the performance of acts utilizing specialized knowledge, skills, and abilities for people in a variety of settings, and includes providing supportive and restorative care and nursing treatment, medication administration, health counseling and teaching, for individuals experiencing changes in the normal health processes. The proper management of client's pain is a nursing function incorporated within the role of the nurse who is responsible and accountable for the care provided and for assuring the safety and well-being of the client (NDAC Chapter 54-05-02).

When adequate pain management is not achieved under the currently prescribed treatment plan, the nurse is responsible for reporting such findings to the prescriber and documenting this communication. Only the licensed health care practitioner with prescriptive authority may change the pharmaceutical management plan. According to the Nurse Practices Act, the nurse must act in "collaboration with other health care professionals in the implementation of the total health care regimen and execution of the health care regimen prescribed by a health care practitioner licensed under the laws of this state". (NDCC 43-12.1-02(5e)).

RANGE DOSE ORDERS:

The nurse is often the health professional most involved in on-going pain assessment and implementing the pain management plan. The LPN may assist in the assessment however the RN has the overall responsibility. In order to achieve adequate pain management, the RN and LPN must base decisions concerning the implementation of range dose orders based on a thorough pain assessment. Both the RN and LPN must be knowledgeable of the:

- medication to be administered,
- anticipated time of onset of the medication,
- time to peak effect, duration of action of the medication ,
- and side effects of the medication to be administered. (Gordon et al 2004)

Consistent with the licensee's scope of practice, both the RN and LPN is accountable for implementing the pain management plan including pharmacologic, non-pharmacologic and complimentary interventions utilizing their knowledge, skills and abilities and organization policy. (NDAC Section 54-05-01-03 & 54-05-02-03).

All nursing practice must meet the definitions of the law. The nurse's scope of practice is determined by the nurse's education, experience, knowledge, skills, and abilities. Each licensee is accountable for providing safe, effective care as well as utilizing ethical principles focused on optimum client care while taking all appropriate measure to relieve suffering.

References

NDCC 43-12.1 Nurse Practices Act
NDAC Article 54-05 Standards of Practice
NDCC Chapter 19-03.3 Controlled Substances for Care & Treatment

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American Pain Society, Advocacy & Policy. (2004) The Use of 'as needed' range orders for opioid analgesics in the management of acute pain. Retrieved from <http://www.ampainsoc.org/>.

California Board of Registered Nursing. (1999). Pain management policy. Retrieved from <http://cbn.org/>.

Federation of State Medical Boards: Model policy for use of controlled substances for the treatment of pain. Retrieved from <http://www.fsmb.org/>.

Standards for Joint Commission Accreditation of Healthcare Organizations.

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Levi, B. (2005). North Dakota Medical Association: Ethics Moment.

Minnesota Board of Medical Practice, Nursing and Pharmacy (2004). Joint statement on pain management. Retrieved from <http://www.mbn.org/>

North Carolina Board of Nursing, Pharmacy and Medicine (1999). Joint statement on pain management in end-of-life care. Retrieved from <http://www.ncsbn.org/>.

Developed by Nurse Practice Committee 2006 with consultation and input from the staff of the following organizations: NDBME, NDBOP, NDDH, NDMA, NDHA, NDLTCA, & NADONA.

2010 NPC RESOURCES:

The ND Board of Nursing endorses pain management guidelines established by the World Health Organization, the U.S. Department of Health and Human Services –Agency for Health Care Policy and Research, and the American Pain Society.

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