HOW ELECTRONIC PRESCRIBING BUNDLES IMPROVED PAIN RELIEF PRESCRIBING PRACTICES FOR PATIENTS UNDERGOING ELECTIVE CAESAREAN SECTIONS

10.1136/rapm-2021-ESRA.120

Background and Aims The elective caesarean section (CS) rate in England was 15% in 2019. It is vital to offer adequate pain relief to these patients to improve experience and reduce morbidity. NICE suggests intrathecal/epidural diamorphine for analgesia. If no contraindications, NSAIDs should be offered. RCoA advises that women receiving opioids should have pain scores recorded and anti-emetics and laxatives prescribed.

The prevalence of electronic prescribing in UK hospitals is increasing. These systems can be beneficial in improving patient safety, governance and productivity.

We audited compliance with aforementioned standards and instigated changes to electronic prescribing systems to improve practice.

Methods Data collected prospectively for 26 patients using anaesthetic records, online prescribing charts and pain assessment by questioning patients. Objectives were; 100% women satisfied with analgesia day 1 post CS; 100% women receive intrathecal/epidural opioids with regional anaesthetic; Unless contraindicated, 100% women prescribed NSAIDs; 100% women prescribed anti-emetics and laxatives PRN.

The cycle was repeated with 15 patients following alteration of prescribing bundles to include recommended medications.

Results Initially, 100% of patients given intrathecal opioid. 69% received NSAIDs. 19% prescribed laxatives and 96% prescribed anti-emetics. 100% of women expressed satisfaction with pain relief. After modification, opioid use remained 100%. NSAID use rose to 100%. 80% prescribed laxatives and 100% prescribed anti-emetics. Satisfaction remained 100%.

Conclusions Adequate post-operative analgesia is a cornerstone of good anaesthetic practice. Electronic prescribing bundles improved compliance with national standards of recommended analgesia for patients undergoing elective CS.

Epidural Blood Patch in the 3rd Trimester of Pregnancy. What About Labour Analgesia?

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10.1136/rapm-2021-ESRA.122

Background and Aims Postdural puncture headache (PDPH) is a well-known and common complication of spinal anesthesia which depends upon the characteristics of spinal needle.

Methods We report a blood patch in the 3rd trimester of pregnancy.