BLOOD PATCH, ASSISTING WITH

POLICY:

RN can assist the anesthesiologist with a blood patch procedure.

PURPOSE:

To provide guidelines for the RN to assist the anesthesiologist while performing a blood patch.

SPECIAL INFORMATION/SUPPORTIVE DATA:

1. Assess pain and document according to scale before and after procedure.
2. Vital signs need to be taken before and after procedure.

EQUIPMENT LIST:

Epidural/Spinal Tray
Sterile Gloves (Dr. and Nurse)
Betadine swabs
10cc syringe (sterile)
Needle (18, 19, 20)
Band aids
Tourniquet

PROCEDURE:

<table>
<thead>
<tr>
<th>Steps</th>
<th>Key points</th>
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<tr>
<td>1. Confirm 2 means of patient identification.</td>
<td>2. Anesthesiologist will evaluate need and discuss procedure with patient.</td>
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<td>2. Obtain informed consent for blood patch.</td>
<td>2.3. Baseline vitals.</td>
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<td>3. Obtain patient’s vital signs, B/P, P, R.</td>
<td>4. Explaining the details before, during and after the procedure will ease the patient’s anxiety and improve cooperation.</td>
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<td>4. Explain the procedure to the patient and provide privacy.</td>
<td>5. The spinal/epidural tray contains betadine but optional betadine swabs may be opened for sterile access. Doctor will open tray.</td>
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<td>5. Assemble equipment for procedure.</td>
<td>6. Doctor preference either lying on side or sitting on edge of bed and leaning forward on pillow supported by bedside table.</td>
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<td>6. Position patient for doctor to prepare the lumbar site.</td>
<td>7. Anticubital blood draw most common site for easy access.</td>
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<td>7. Once the anesthesiologist has the spinal needle in the appropriate space, he will direct the nurse to withdraw blood. Nurse applies tourniquet to arm before donning sterile gloves.</td>
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8. Nurse dons sterile gloves and uses betadine that is wiped in a curricular motion away from puncture site. Three different sterile pads or swabs of betadine are used to cleanse venipuncture site.

9. Nurse withdraws 10cc (or amount specified by doctor) of blood using 18, 19, or 20 gauge needle (or gauge specified by doctor)

10. When procedure completed, reposition patient for comfort.


12. Charge for procedure.

8. Sterile techniques must be utilized. An alternative of using swab sticks before donning sterile gloves can be done.

9. Doctor will hand sterile syringe and needle to nurse to maintain sterile field.

10. Doctor may order patient to lie flat for ½ hour after procedure.

11. Immediate results most often occurs with relief from spinal headache when upright.

12. Use PACU charge form.