

**a) INTRATHECAL NARCOTICS IN THE PACU**

There have been several cases where SDCU patients have received intrathecal narcotics (hydromorphone). According to the nurse manager, any intrathecal narcotic is treated by the spinal morphine protocol. This mandates a prolonged observation and admission to the hospital. I. Zunder requested that we limit our choice of intrathecal narcotics to fentanyl or Demerol in surgical daycare patients. The clinical pharmacist has been asked to obtain any information regarding the pharmacokinetic/dynamics of hydromorphone.

There have been several situations where patients have been brought to PACU with indwelling spinal catheters. As there is no protocol, the nurses feel very uncomfortable caring for these patients. Dr. Garnett is in the process of drafting guidelines. In the interim, we are instructed to use the current Acute Pain Service form. 0.25% bupivacaine at 1-2 ml/hr. will be the standard drug and infusion rate. All boluses will have to be administered by the anesthesiologist. The epidural catheter will have to be labeled as being a spinal catheter. The catheter will need to be removed prior to discharge from the recovery room by the anesthesiologist.