Recipes for Success: Taking the Guesswork Out of PRN Medication Parameters

Cynthia McDaniel MSN RN
ElderWise Inc

Presentation Details

Learning Methods:
PowerPoint, demonstration, small group discussion, handout

Outcomes
• Review Oregon regulations regarding prn medication parameters.
• Consider the ingredients for writing prn medication parameters.
• Learn to write prn medication parameters.

Let’s bake a cake!

The Ingredients for our Cake

• Sugar
• Flour
• Cocoa Powder
• Baking Soda
• Baking Powder
• Salt
• Eggs
• Milk
• Oil
• Vanilla Extract
• Water

The Recipe (Ingredients)

• 2 cups white sugar
• 1 3/4 cups all-purpose flour
• 1/4 cup unsweetened cocoa powder
• 1 1/2 teaspoons baking soda
• 1 1/2 teaspoons baking powder
• 1 teaspoon salt
• 2 eggs
• 1/2 cup milk
• 1/2 cup vegetable oil
• 2 teaspoons vanilla extract
• 1 cup boiling water
**The Instructions**

- Preheat oven to 350 degrees F (175 degrees C). Grease and flour two 9 inch cake pans.
- In a medium bowl, stir together the sugar, flour, cocoa, baking soda, baking powder, and salt. Add the eggs, milk, oil, and vanilla. Mix for 3 minutes with an electric mixer.
- Stir in the boiling water by hand. Make sure to mix it in well...otherwise the batter will look runny.
- Pour evenly into the greased pans.
- Bake for 30 to 35 minutes in the preheated oven, until a toothpick inserted comes out clean.
- Cool for 10 minutes before removing from pans to cool completely.
- Delicious by itself, either slightly warm or even chilled.

**Why Write PRN Medication Parameters?**

- Because it’s the Law.
- Because the regulations governing the care setting require them.
- Because administering a prn medication without parameters may mean an unlicensed person is practicing nursing.
- Because they protect residents and employees.

**PRN Medication Parameters Provide...**

- The ingredients (details) for the medication recipe.
- The instructions for the medication recipe.

**What Does PRN Mean?**

- Pro re nata is a Latin phrase meaning “in the circumstances” or “as the circumstance arises.”
- It is commonly used in health care to mean “as needed” or “as the situation arises.”

**Defining the Circumstances/Situations**

PRN Medication Parameters provide the instructions for administration of “as needed” medications.

**Who Can Write PRN Medication Parameters?**

- The Prescriber
- The RN
The Rules – OSBN: 851-047-0020 (5) (a-d)

Administration of noninjectable p.r.n. medications and treatments may be taught to unlicensed caregivers by a Registered Nurse or a Licensed Practical Nurse at the direction of a Registered Nurse...
(a) Initial direction for administration of noninjectable medications as described in OAR 851-047-0020(2) is provided for the p.r.n. medications;
(b) The Registered Nurse writes parameters to clarify the physician or nurse practitioner’s p.r.n. order;
(c) The Registered Nurse or Licensed Practical Nurse leaves written parameters for the unlicensed caregiver(s) who administer medications; and
(d) The Registered Nurse or Licensed Practical Nurse leaves information for the caregivers who administer medications about the medications/treatments to be administered, including the purpose of the medications/treatments, their side effects and instructions for action if side effects are observed.

The Rules – APD: 411-054-0055 (2)(b)(E); (3)(b)(E) Medications and Treatments

MEDICATION ADMINISTRATION
(b) The treatment record for each resident that the facility administers medications to must include:
(e) Resident specific parameters and instructions for p.r.n. medications

TREATMENT ADMINISTRATION
(b) The treatment record must include:
(e) Instructions for p.r.n. treatments, including resident specific parameters.

The Rules – APD: 411-054-0055 (6) (d) (A) (B) Medications and Treatments

PSYCHOACTIVE MEDICATIONS
(d) Medications that are administered p.r.n. that are given to treat a resident’s behavior must have written, resident-specific parameters.
(A) These p.r.n. medication(s) may be used only after documented non-pharmacological interventions have been tried with ineffective results.
(B) All caregivers must have knowledge of non-pharmacological interventions.

Before Writing the Parameters

The RN must assess the resident specific to the p.r.n. medication.
The unlicensed person may not administer the medication without p.r.n parameters in place.
Until the nurse completes the assessment and writes the parameters, directives should be on the MAR e.g., “Call RN before giving.”

Writing PRN Medication Parameters Requires...

Thinking
About the who, why, what, when, where, and how of medication delivery.
And this takes time...

Let’s Get to the Recipes

• Pain Management
• Bowel Management
• Sleep Assistance
• Psychoactive Medications
Is the person able to request the medication?

“Per Resident Request”

“Upon Resident Request”

Assumes person has the capacity to request.

Pain Management

- Acetaminophen 325mg. 1-2 tabs po q 4 hr prn pain.
- Ibuprofen 200mg. 1 tab po q 4 hr prn pain.
- Hydrocodone/APAP 5/500mg. 1-2 tabs po q 4 hr prn pain.

The Use of Pain Scales

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Pain</td>
<td>Mild</td>
<td>Moderate</td>
<td>Severe</td>
<td>Very Severe</td>
<td>Worst Pain Possible</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PAINAD Scale

<table>
<thead>
<tr>
<th>Item</th>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>0-3</td>
<td>Occasional discomfort</td>
</tr>
<tr>
<td>4-6</td>
<td>Occasional discomfort or pain</td>
<td></td>
</tr>
<tr>
<td>7-9</td>
<td>Significant pain</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Severe pain</td>
<td></td>
</tr>
</tbody>
</table>

Bowel Management

- MOM 30cc po qd prn constipation.
- Glycerin supp. One suppository one time a day prn constipation.
- Fleets enema. Give prn constipation.

Sleep Assistance

Trazadone 25mg prn at HS. May have another 25mg prn insomnia.

Consider:
- Sleep cycle and patterns
- How to know if the person is not sleeping
- Alternatives to medications
- Co-morbidities
- If other medications impact sleep
**PRN Psychoactive Medications**

Given for a specific behavior or symptom.

Generally given only after three (3) individualized non-pharmacologic interventions have been attempted.

**Psychoactive Medications for Behavior**

- Seroquel (quetiapine) 50mg twice a day prn agitation or anxiety.
- Risperdal (risperidone) 0.5mg q8 hr prn anxiety or agitation.
- Ativan (lorazepam) 1mg every 12 hrs prn anxiety.

**Non-Pharmacologic Interventions**

Consider what may be triggering the behavior/symptom?

- Noise, pain, constipation, infection, hunger, fear, fatigue, boredom, a need to move?

Modify the environment: Remove the trigger, decrease noise, provide space/privacy

Provide comfort for the distress.

**One More Ingredient**

The RN may write administration parameters for a prn-ordered medication at the maximum frequency indicated by the prescriber for a specific and limited length of time.

This means the RN may schedule a prn medication for a limited length of time as long as the schedule is within the prescriber order and grounded by retrievable evidence of engagement of nursing process.

- Per G. Koch MSN RN, Oregon State Board of Nursing, 2017

**What is “Engagement of Nursing Process?”**

The critical thinking model use at the RN level of practice that integrates the:

- Singular and concurrent actions of assessment
- Identification of reasoned conclusions
- Identification of expected outcomes
- Planning
- Implementation
- Evaluation

- Per G. Koch MSN RN, Oregon State Board of Nursing, 2017

**Thank You!**

Be sure and complete the evaluation and take a handout when you leave.