The K.E.L.P. Team
(Ketamine, Epidural, Lidocaine, PNBs)
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Author’s Conflict of Interest:
• Cindy has no conflicts to report
• Jason has no conflicts to report

Conflict of Interest Disclosure

Objectives

Objective 1: Summarize rationale for the work of the KELP Team.
Objective 2: State two non-opioid pharmacologic modalities utilized in hospitalized adult patients.
Objective 3: Following review of ASPMN survey results, name three barriers to the use of ketamine, epidural, lidocaine or peripheral nerve blocks.
What is K.E.L.P?

K.E.L.P?

A quest for improved pain management
- Non-opioid modalities
- Viewed through the nursing lens
- Removing barriers to use

It all began.....

Provide a nursing lens to the opioid/pain crisis from the postoperative perspective
- Improve the patient experience of postoperative pain management AND reduce the utilization of opioids
- Reduce variations in accessibility to non-opioid pharmacological pain management options—specifically ketamine infusions, epidurals, lidocaine infusions, and peripheral nerve blocks (PNBs)

Rationale for Work
Process

- Determination of modalities for focus
- PICOS
- Literature search terms
- Review strategy
  - PRISMA
  - Harms perspective
  - GRADE Evidence
- Development of task force team

Barriers to Use

- ASPMN Survey
- State Boards

Results of Survey
Next Steps

- Complete literature review
- Compile guideline
- Publish results
- Utilize ASPMN® legislative contacts
- Present results at a future conference

Task Force Members

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