

Patient Controlled Analgesia (PCA) by Proxy and Authorized Agent Controlled Analgesia (AACA)

Analgesia is the medical word for pain relief. With patient controlled analgesia (PCA), patients can give their own dose of pain medicine.

PCA by Proxy

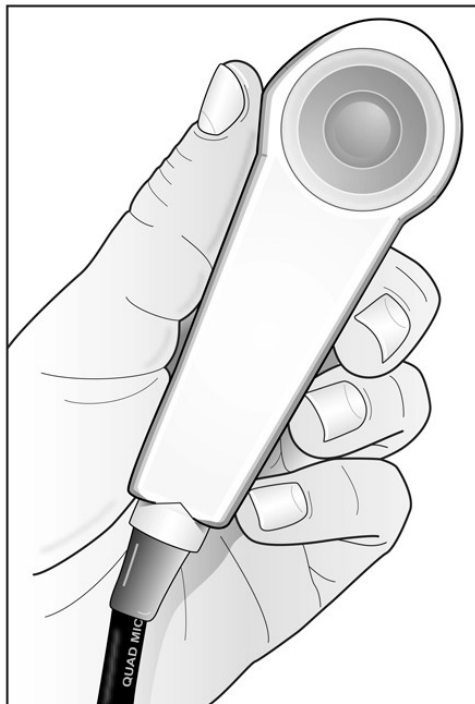
This is when a family member or caregiver (not a healthcare worker) is allowed to act for the patient. In this case the family can push the button on the PCA pump when the patient looks to be in pain.

How IV PCA Works

The PCA system is made up of three parts:

1. A pump which is kept next to the bed
2. A control button at the end of a cable which you keep at your side
3. Pain medicine in the pump that is connected to your IV

The PCA pump is carefully set up by two nurses. Your nurse will set the pump to give the amount of medicine that the doctor has ordered for you. These medicines can give great pain relief.



PCA Directions

Press the button to send the medicine into the IV. There is a short time, (often 6-10 minutes) after you press the button when the button will be locked. This is for the patient's safety. It gives the medicine a chance to work. Once enough time has passed, the control button will lite up and you can give more medicine if needed.

It is common to have to press the button several times each hour to keep pain under control. But patients will need less over time.

Side Effects

- Nausea
- Itching
- Sleepiness
- Decreased breathing
- Death, if not carefully watched

PCA and Safety

A nurse will check on the patient often. If a patient becomes too sleepy or their breathing slows too much, there are things the nurse can do to help. The nurse can:

- Stop the PCA and let the medicine wear off.
- Give another medicine to reverse the effects of the PCA.

Requirements of the Proxy

The medical team caring for the patient will talk with the family to figure out who the proxy will be. The proxy is the person who is allowed to push the PCA button for the patient. Staff members will check with the proxy every shift to make sure they understand how to act safely as the proxy.

The proxy must:

- Know the patient well.
- Know the risks and benefits of the medicine and PCA.
- Be able to tell when the patient is in pain by listening to the patient.
- Understand physical behaviors (like jaw clenching, or grimacing) that tell that the patient is in pain.
- Know when it is safe to give a dose of medicine.
- Know when it is not safe to give a dose of medicine.
- Call for help if they notice a change in patient's breathing.
- Be able to spend a lot of time at the bedside.

Risks

If the proxy does not understand the patient's signs of pain, they may give too little or too much pain medicine.

- **Too little** pain medicine will cause the patient to remain in pain.
- **Too much** pain medicine can cause sleepiness, abnormal breathing and in rare circumstances death.

Safety Guidelines for the Proxy

It is **safe** to push the button if the patient:

- Tells you they are in pain or shows signs of pain and:
 - The patient is awake and breathing normally.
 - The patient is awake and breathing fast.

It is **not safe** to push the button if the patient:

- Is sleeping or looks sleepy.
- Is hard to wake up.
- Has changes in their breathing pattern such as:
 - Long pauses between breaths.
 - Slower breathing.

If you are concerned about the patient's safety:

1. Press the call button and ask for someone to check on the patient.
2. Try to wake up the patient and ask them to take a deep breath while you wait for a staff member.
3. **Do not** push the PCA button until a staff member checks the patient and tells you it is ok to push the button again.

If the Proxy Needs to Leave

Talk to the nurse as soon as you can if you need to leave the patient's bedside. If you need to leave for the night or for several days, the team will need time to make a plan. You cannot give permission to another person to push the pain button. If a new person becomes the proxy, the team will need to teach the new proxy how to safely use the PCA.

Changes to the Pain Plan

The team may decide to change what pain medicine is used if:

- The patient's pain is not well controlled.
- The patient has too many bad side effects.
- The patient can use pain medicine in another way.

Authorized Agent Controlled Analgesia (AACCA)

AACA is much like PCA by proxy. If the patient can't use PCA because of young age, developmental stage, injury or illness, they may assign the patient's nurse to push the PCA button. This may happen when the patient's family is not able to be at the bedside or the family is not comfortable pushing the button.

AACA and Safety

To keep the patient safe, no one other than the RN caring for the patient can push the button if using AACA. Family members cannot push the button.

The nurse will check the patient every time the button is pushed to make sure it is safe to give a dose of medicine.

How You Can Help

1. **Look for signs of pain.** If you think the patient is in pain, please call the nurse. You can share the signs of pain you are seeing. You and the RN can discuss how to get better pain control for the patient.
2. **Try other pain control methods.** You can still help the patient manage their pain by providing comfort and distraction from the pain. You can try:
 - Rocking in a chair
 - Reading a book
 - Singing quietly
 - Other things you use at home

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©9/2021. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7697