

Applies To: **UNM Hospitals, UNMCC**] Responsible Department: Labor and Delivery

Revised: May 2018

Title: Coping with Labor Algorithm© Pain Assessment			Guideline		
Patient Age Group:	() N/A	() All Ages	() Newborns	(x) Pediatric	(x) Adult

DESCRIPTION/OVERVIEW

The purpose of this Coping with Labor Algorithm[©] Pain Assessment Guideline is to guide the nurse with assessment and steer the obstetric nurse through the many pharmacologic and non-pharmacologic options available to the laboring patient. The intent of the Coping with Labor Algorithm[©] is to meet the labor pain assessment needs of laboring women and manage the labor pain according to the algorithm and patient's desires. This algorithm is specific only to labor pain. Any other type of pain will be assessed according to the current hospital pain assessment guideline. "This algorithm enables a woman to avoid quantifying her pain during labor, which is only one component of her overall labor and birth experience. The Coping with Labor Algorithm has proven to be a useful tool in the assessment and management of laboring woman." (Roberts, Gulliver, Fisher, & Cloyes, 2010).

REFERENCES

Gulliver, B. G., Fisher, J., & Roberts, L. (2008). A New Way to Assess Pain in Laboring Women: Replacing the Rating Scale With a "Coping" Algorithm. *Nursing for Womens Health*, 12(5), 404-408. doi:10.1111/j.1751-486x.2008.00364.x

Roberts, L., Gulliver, B., Fisher, J., & Cloyes, K. G. (2010). The Coping With Labor Algorithm: An Alternate Pain Assessment Tool for the Laboring Woman. *Journal of Midwifery & Womens Health*, 55(2), 107-116. doi:10.1016/j.jmwh.2009.11.002

AREAS OF RESPONSIBILITY

Labor and Delivery
OB Testing and Triage

GUIDELINE PROCEDURES

- 1. The nurse will follow the Coping with Labor Algorithm[©]. See algorithm below.
 - 1.1. Coping assessment will be conducted on all patients upon arrival/admission to the hospital, when a patient's condition changes, or care provider changes.
 - 1.2. Coping reassessment occurs after every intervention, including non-pharmacologic techniques. The type of the intervention and route of administration will dictate the time frame for reassessment.
 - 1.3. The patient may request pharmacologic and/or non-pharmacologic interventions for labor pain at any time during her labor regardless of coping status.
 - 1.4. When pharmacologic interventions are requested by the patient and/or offered by the nurse, the patient will be educated on their options and allowed to choose the option they desire.

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Coping with Labor Algorithm V2 © Observe for cues on admission and throughout labor. Legend Assessment per protocol: [S] = Sufficient Evidence Ask: "How are you coping with your labor?" [L] = Limited Evidence *Every shift * PRN * At signs of change. [I] = Insufficient Evidence [*] = No Evidence & No Harm **Not Coping** Coping Clues you might see if woman is NOT coping Cues you might see if woman is coping: (May be seen in transition) States she is coping States she is not coping Rhythmic activity during Crying (May see with self-hypnosis) contraction (Rocking, swaying) Sweaty Focused inward Tremulous voice Rhythmic breathing Thrashing, wincing, writhing Inability to focus or concentrate Able to relax between Clawing, biting contractions Panicked activity during contractions Vocalization (moaning, counting, chanting) Physiologic. Natural Emotional/ Psychosocial Physical Environment process of labor Appropriate changes to Patient desires Patient desires non-One-on-One Support [S] environment PRN [S] pharmacological pharmacological interventior Midwifery Care being "With Woman" intervention Mood [S] Lighting Music Fragrance IV pain med Interventions as to what would TV/Movie Epidural give best relief and is indicated The nurse should consider: Temperature [*] Nitrous Oxide (what does the patient desire): Patient's life Whispering Tub/bath/shower Sexual abuse ["] voices Hot pack/cold pack . Fear Water injections Stress Massage/pressure Follow: Interpersonal dynamics Movement/ambulation/ position changes Unit Service line Birth ball Focus points Hospital Breathing techniques Offer social work consult Guidelines/standards Acupuncture for pharmacologic Self-Hypnosis intervention TENS

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Coping

Reassessment

Not Coping

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2. Documentation

- 2.1. Coping assessments will be documented in the electronic medical record utilized on Labor and Delivery.
- 2.2. Pharmacologic interventions will be documented on the hospital-wide electronic MAR.

DEFINITIONS

Coping with Labor – A woman's perception of experiencing labor pain without suffering.

SUMMARY OF CHANGES

This is a new guideline

RESOURCES/TRAINING

Training is incorporated into the new-hire orientation of new nurses.

Resource/Dept	Contact Information		

DOCUMENT APPROVAL & TRACKING

Item	Contact De		Approval
Owner	[Unit Director and UBE, Labor and Delivery]		
Consultant(s)	N/A		
Committee(s)	N/A		[Y or N/A]
Nursing Officer	[Sheena Ferguson], Chief Nursing Officer		[Y or N/A]
Medical Director	[Name, Department (or Chief Medical Officer)]		[Y or N/A]
Human Resources	N/A		[Y or N/A]
Finance	N/A		[Y or N/A]
Official Approver	[Michelle Wafer, Executive Director, Women's Area]	_	Y
Official Signature		Date:	
Effective Date	1	May, 2018	
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