Patient Controlled Analgesia (PCA) by Proxy

What Is Patient Controlled Analgesia?
Analgesia is the medical word for pain relief. With PCA, you are able to give your own dose of pain medicine.

How IV PCA Works
The PCA system consists of:
- A pump which is kept next to the bed
- A control button at the end of a cable which you keep at your side
- Pain medicine in the pump that is connected to your intravenous line. (IV)

Your nurse will set the pump to give the amount of medicine that is safe for you.

To get pain medicine you push the control button.
- When you press the button the medicine goes into your IV
- There is a lock out period (often 6-10 minutes) after you press the button. This is for your safety. Time gives the medicine a chance to work. Once enough time has passed, the control button will light up and you can give yourself more medicine if needed.
- It is common to have to press the button several times each hour to keep pain under control.

What is PCA by proxy?
PCA by proxy is a term used when a family member or caregiver is allowed to act for the patient. In this case the family is allowed to push the button on the PCA pump when the Patient looks to be in pain.

Is this safe?
Pain medicines are given by the PCA pump. These medicines can give great pain relief. The PCA pump is carefully set up by two nurses. A nurse will check on the patient often to make sure the patient is safe. This medicine does have side effects. The side effects from these medicines include:
- nausea
- itching
- sleepiness
- decreased breathing
- if not monitored carefully, death.

If a patient becomes too sleepy or their breathing slows too much, there are things that can help. Examples include:
- stopping the PCA and letting the medication wear off
- give another medication to reverse the affects of the PCA
Who can safely be the proxy?
PCA by proxy is safe when the team caring for the patient is able to find a person who can safely be the proxy. This person must:
- Know the patient well
- 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.

The proxy is the person who is allowed to push the PCA button for the patient. If the person who is acting as the proxy does not understand the signs of pain the patient shows, they may give too little or too much pain medicine.
- If they give too little pain medicine, the patient will keep having pain
- If they give too much pain medicine the patient can become sleepy, may not breath normally and, in rare circumstances may die.

How will the proxy be chosen?
The medical team caring for the patient will talk with the family. That family member or caregiver would need to understand:
- The risks and benefits of the medicine and PCA
- How does this patient shows their pain
- When it is safe to give a dose of medicine
- When is it not safe to give a dose of medicine
- To know they need to call for help if a change in patient’s breathing is noted
- They need to be able to spend a lot of time at the bedside so the patient can get consistent pain relief

Staff members will check with the proxy every shift to make sure they understand how to act safely as the proxy.

What if the proxy needs to leave?
If at any time the proxy feels they need to leave the patients bedside, they should talk to the nurse who will help sort out the issue.

Becoming the Proxy is a lot of responsibility. We want people to feel comfortable with their decision. If you need to leave for short periods of time, such as for meals, talk to the nurse. The nurse caring for the patient may be able to take over the PCA for a short time. If you need to leave for the night or several days, you need to:
- Talk to the nurse as soon as possible so the team can find way to control the patient’s pain
- You may not give permission to another person to push the pain button – that is not safe
- If a new person becomes the proxy, the team will need to discuss the change. The new proxy will need to learn how to safely use the PCA

The team may also 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
- If the patient is able to use pain medicine in another way

How will I know if it is safe to push the button?

Safe to push the button:
- Patient tells you they are in pain
- You see known signs of pain
- Patient is awake, breathing normally
- Patient is awake, breathing fast
What do I do if I think my family member/friend is not safe?
If you see any of these changes, call out to a staff member to come and check on the patient.

- Patient is sleeping
- Appears sleepy
- Difficult to wake up the patient
- Patient breathing pattern changes, they have long pauses between breaths
- Slower breathing

- try to wake up the patient and have them take a deep breath while you are waiting for a staff member to come to the room
- stop pushing the button until a staff member checks the patient and tells you it is ok to push the button again
- If a patient is sleeping, the button should not be pushed until the patient awakens and can indicate they need more medicine.

Everyone’s first priority is to keep the patient safe.

Not safe to push the button:
- Patient is sleeping
- Appears sleepy
- Difficult to wake up the patient
- Patient breathing pattern changes, they have long pauses between breaths
- Slower breathing

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 ©11/2017. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#7697