



IV to oral paracetamol adoption in obstetric anaesthesia: a sustainable quality improvement success in a leading Irish maternity hospital

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AIM

To reduce IV paracetamol usage in caesarean section patients by promoting oral administration through a structured quality improvement project.



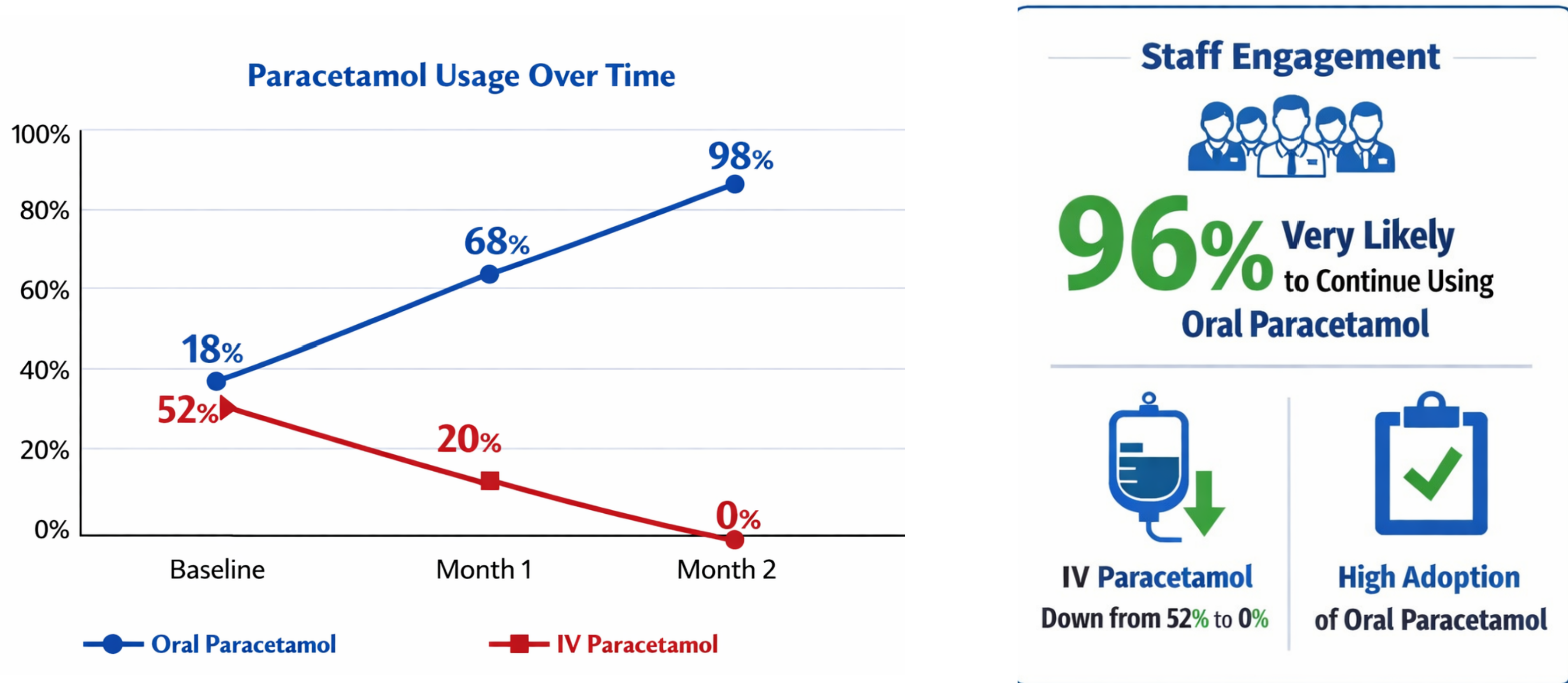
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METHODOLOGY

- **Educational sessions** were delivered to nursing staff and anaesthetic team to reinforce the efficacy and sustainability of oral paracetamol in obstetric analgesia.
- To support awareness and encourage behavior change, visually engaging **infographics** were developed and displayed in recovery area.
- **Pharmacists** were involved to ensure consistent availability of oral paracetamol in the recovery area.
- Staff engagement and feedback were monitored using **Google Form survey**.
- **Hospital eGuide app** was updated to reflect the revised post-LSCS prescribing protocol.
- Implementation was **audited** over three-month period.

RESULTS



Post-intervention data showed a substantial increase in oral paracetamol administration, rising from 18% (9 patients) to 98% (49 patients). Concurrently, intravenous paracetamol prescriptions decreased from 52% (26 patients) to 0%. Staff engagement with 96% (25 staffs) of respondents in the feedback survey.

CONCLUSION

Transitioning from IV to oral paracetamol in obstetric anaesthesia is a feasible, sustainable, and cost-effective intervention. This QI project demonstrates that targeted education, visual tools, and cross-departmental collaboration can drive meaningful improvements in clinical practice while supporting environmental stewardship.

REFERENCES

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