Pain Management

Learning Objectives:
- Describe tools available for assessing pain
- Be familiar with pain levels and interventions
Pain Management

We believe ......

• Pain management is an integral part of excellent patient care
• Pain is what the patient says it is
• Untreated or undertreated pain causes suffering

Treatment is.....

• Holistic
• Interdisciplinary
• Involves patients and families
Pain Management

Standards We Follow:

• Recognize patients’ right to have pain assessed and managed.

• Screen all patients for pain and determine the nature and intensity.

• Periodically reassess patients’ pain status.

• Prescribe effective pain control medications.

• Address continued need for pain control at discharge.

• Educate patients and their families about pain treatment.
Assessing Pain

• **Tools for assessing pain** include numerical scale 0-10, FLACC, FACES, NPASS, PAINAD

• CNAs do pain scales 0-10 with other V.S. CNAs document this scale. It is a matter of recording the data gathered
  – CNAs report any c/o pain to RNs. (Even on a surgical floor, the pain may be chest pain – therefore all pain is reported) It is the RNs responsibility to do a comprehensive pain assessment

• Characteristics of pain must be assessed to determine type of pain (i.e. visceral – responds poorly to narcotics, neuropathic – amount of narcotics can significantly decrease if antidepressants or anticonvulsants are used, bone – lump incisional pain with bone pain, response fairly well to narcotics although anti-inflammatories also help). The type of pain guides the pharmacological adjuvant interventions.

• JC requirement that all patients be reassessed within 1 hour of a medication intervention

• Pain scale of 4 or greater requires an intervention – not necessarily pharmacologic. What are some non-pharmacologic interventions?

Pain Management - Tools

Resources:
- Posters
- Policies
  - Pain Management of Neonates and Infants
  - Pain Management Policy
- Job Aid: PCA (Gemstar)