

Baylor Regional Medical Center at Plano believes that managing pain is an important part of quality care. Good pain management requires cooperation and communication between physicians, nurses, other team members when appropriate, and the patient.

Patients have the right to have their reports of pain accepted and acted upon by healthcare professionals. They have the right to have pain controlled, no matter what its course or how severe it may be.

Patients should be prepared for us to routinely:

- Ask for a description of their pain (see suggested words to describe below)
- Ask about pain including intensity, location, duration, things that make the pain better or worse
- Ask if treatments are relieving their pain to their satisfaction
- Discuss treatment options and goals for pain management

We can best help relieve pain if patients:

- Tell us when they have pain and answer the above questions when asked
- Take pain relief medicine when the pain first starts
- Tell us if the treatments are working or not
- Tell us about any side effects from pain treatment, such as nausea, constipation, vomiting, sleepiness or slow breathing
- Tell us about all pain medications they are taking, including over-the-counter medications
- Tell us about their cultural preferences or beliefs that influence their pain management plan
- Tell us of any concerns about their pain treatment

Common Patient Myths that are Barriers to Pain Management:

- ***Fear of Addiction:*** Many patients worry about psychological dependence, but pain experts have shown that very few patients become addicted.
- ***Fear of Tolerance to Pain Medications or More Pain Means You are Getting Worse:*** Patients may be concerned that pain medications will not be as effective if pain reoccurs or becomes more severe. With effective use of pain management, tolerance can be avoided.
- ***Fear of being viewed as “weak”:*** Patients may worry about being viewed as psychologically and physically weak due to the use of pain medications. Without pain, their quality of life is better.
- ***Acceptance of pain as something to live with:*** No one has to live with unmanaged pain.

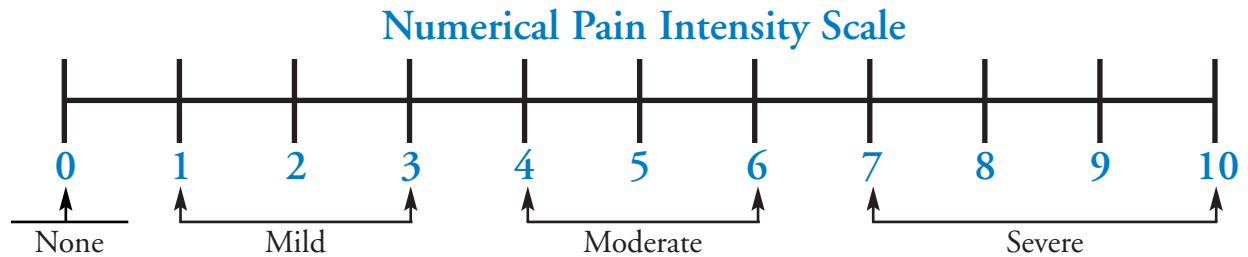
Questions patients will be asked about their pain:

1. Describe the pain in detail using words from below.

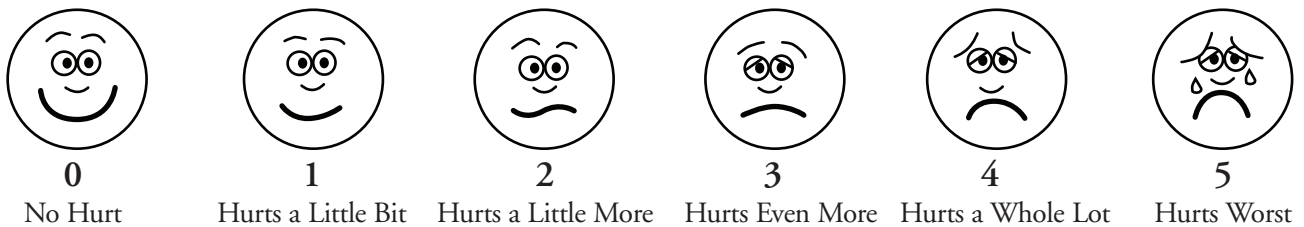
Aching	Miserable	Stabbing	Unbearable
Radiating	Tender	Deep	Penetrating
Numb	Shooting	Dull	Burning
Sharp	Crampy	Exhausting	Pressure
Throbbing	Nagging	Gnawing	Squeezing

2. Intensity: Rate your pain (0-10)

- Patients can rate their pain using examples from the pain scale below.
- If 0 is no pain and 10 is the worst pain imaginable, what is your pain level now?
- In the last 24 hours?



Wong-Baker Pain Intensity Faces Scale



3. Location: Where is your pain? Be specific.

4. Duration:

- Is the pain always there? (continuous pain)
- Does the pain come and go? (breakthrough pain)
- Do you have both types of pain?

5. Aggravating and alleviating factors:

- What makes the pain worse?
- What makes the pain better?

6. How does the pain affect your life? This includes sleep, appetite, energy, activity, relationships or mood.

7. If your pain medicine causes any of the following symptoms, please notify your caregiver:

- | | | |
|--------------------|------------------|----------|
| Nausea or vomiting | Constipation | Weakness |
| Sleepiness | Bladder problems | |
| Confusion | Itching | |

It is important that only the patient uses the button on the patient controlled analgesia (PCA) device to administer a dose of pain medication.

Patients should speak to their physician or other healthcare providers about available strategies and techniques to manage their pain, in addition to their pain medication.

Controlling pain will increase the patient's chances for faster recovery, assists them in coping with their illness, and improves our ability to be helpful to the patient.