

Pain Management Guidelines/Modalities



0
NO HURT



1
HURTS
LITTLE BIT



2
HURTS
LITTLE MORE



3
HURTS
EVEN MORE



4
HURTS
WHOLE LOT



5
HURTS
WORST

1. No intervention required
2. Continue routine assessment

1. Apprise Physician of patient's pain status
2. The Physician will assess & evaluate for pharmacologic intervention
 - **Non-Opioid Analgesics (Dosed Prn) – Acetaminophen (Tylenol®) 650mg-975mg po q4-6h prn NTE 4gm/day**
or
Ibuprofen (Motrin®) 200-400mg po q4-6hrs NTE 2.4gm/day
 - ±
Adjuvant-Amitriptyline (Elavil®) 10-150mg po qhs (titrate dose q 5-7 days)
 - Carbamazepine (Tegretol®) 100-1600mg/day po bid –tid (start 100mg qhs/bid)**
3. Consider implementation of attached Modalities
4. Provide Patient Educational Hand-outs including Pain Management Strategies
5. Consider impact on Tx: Planning Process
6. Refer to group(s) as appropriate.

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±
Opioid Analgesic Propoxyphene 100 & Acetaminophen 650mg (Darvocet N100®) 1-2 tabs po q4-6hprn NTE 6 tabs/day
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6. Refer to group(s) as appropriate
7. Reassessment (Monitor pain rating as 5th v/s as appropriate).

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3. Consider implementation of attached Modalities
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5. Consider impact on Tx: Planning Process
6. Assess effectiveness of current modalities as appropriate
7. Consider discharge planning needs as indicated
8. Refer to group(s) as appropriate
9. Reassessment (Monitor pain rating as 5th v/s as appropriate).

1. Apprise Physician of patient's pain status
2. Consider appropriate consult
3. The Physician will assess & evaluate for pharmacologic intervention
 - **Non-Opioid Analgesic – Ibuprofen (Motrin®) 800mg po q4-6hprn NTE 2.4gm/day**
±
Opioid Analgesic Hydrocodone 5mg & Acetaminophen 500mg (Vicodin®) 1-2 tabs po q4-6hprn NTE 8tabs/day
 - ±
Adjuvant-Amitriptyline (Elavil®) 10-150mg po qhs (titrate dose q 5-7 days)
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MODALITY I**Environmental**

Control environmental stimuli.

- Reduce noise
- Speak softly
- Close doors softly
- Limit traffic
- Lower lights

Cluster care activities and allow patient to sleep uninterrupted.

- Allow patient time in room until pain subsides

MODALITY II**Psychological Interventions**

Relaxation techniques.

- Listen to music
- Relaxation breathing
- Slow rhythmic breathing
- Breathe in slowly and deeply
- Slowly breathe out and feel yourself beginning to relax
- Breathe in and out slowly and regularly, i.e. abdominal breathing
- Focus on breathing slowly and rhythmically
- Imagine you are doing this in a calming and relaxing place
- Do steps 1 through 4 only once or repeat steps 3 and 4 for up to 20 minutes
- End with a slow deep breath as you say to yourself, "I feel alert and relaxed."
- Relaxation Therapy
- Stress Management
- Music Therapy
- Recreation Therapy

MODALITY III**Physical Intervention**

Apply ice packs

Apply heat packs

Recreation Activities

Note: Modalities are multifaceted treatment approaches to be used according to assessed need (i.e. hx; chronicity; duration). Categories are not exclusive to the degree of pain and can be used individually or simultaneously.