



SUBURBAN HOSPITAL

JOHNS HOPKINS MEDICINE

Pain Management

November 2017

Pain Management Standards

- All patients have the right to adequate pain management
- All patients must have their pain assessed and reassessed at regular intervals
- There must be no barriers to pain management such as language or inability to communicate
- All patients should be educated about pain management and be included in the plan of care for pain management

Pain Assessment

- Pain assessment is done upon admission, at least every shift and as needed. If pain medication is administered, the patient is reassessed within 60 minutes
- For patients who can self report pain, the 0-10 numeric pain scale is used where 0 is no pain and 10 is the worst possible pain. For patients who cannot communicate verbally, the Faces Pain Scale is utilized. This scale looks at behaviors such as facial, restlessness, muscle tension, consolability and vocalization.
- For undiagnosed, worsening, or unrelieved pain, the provider will be asked to re-evaluate the patient, and perhaps refer to the Pain Service for assistance in managing the patient

Pain Reassessment

- Reassessment is performed after pain medication is administered to see if the intervention has been effective.
- After medication administration, reassessment is done within 60 minutes.
- If the pain score remains above 5, additional interventions will be offered to the patient, and may include alternative therapies.

Ordering Medication Pain

- Within Epic, there are acute pain management order panels that shows which formulary medications fall into the three different categories of mild, moderate and severe
- Patients may only be ordered one pain medication for each level of pain- for example- no “Tylenol and Ibuprofen for mild pain”. It is out of the Nurses’ scope of practice to decide between two different medications for the same level of pain
- Choosing an appropriate pain medication for the level of pain reported by the patient will help address the patient’s pain without overmedicating the patient.

PCA/Epidural Order Sets

- There is a standardized patient controlled analgesia (PCA)/Epidural order set for use by any physician or authorized healthcare provider. The Epidural pain management orders are completed by Anesthesia
- An Interdisciplinary Pain Policy also is available on HPO. The policy details the practice of pain management at Suburban Hospital.

Support for Pain Management

- There is a Pain Service that consults for acute/ongoing pain issues available 24/7/365. The on-call Pain Service provider can be reached by entering a pain consult, order or by paging the on-call physician through the hospital operator
- Upon discharge, the patient can call the Physician referral phone number- 301-896-3939 to obtain the name of a physician in the community.

Opioid Management Tips

- There is a registry available (CRISP) to see what other prescriptions have been given to the patient at other facilities or pharmacies
- Be mindful of the amount of pills being prescribed upon discharge- only prescribe the amount the patient will need, instructing them to follow up with their provider if additional medication is needed
- Inform patients where they can dispose of controlled substances in the community- Walgreens, CVS, or any Fire Department. Patients should call first for available times

Additional Information

- Providers will participate in the state of Maryland Prescription Drug Monitoring Program (PDMP) as required
- Stay abreast of information coming from State and Regulatory agencies regarding opioid management
- Pain management takes a team!!