Providing Timely Pain Management

Problem

One overriding concern that many patients have with medical treatment is dealing with the pain. Patients expect nurses to be strong advocates for them and to be proactive in seeking treatment plans that relieve their suffering.

Consequence

Failure to adequately control pain in a patient can lead to discomfort and may interfere with treatment and recovery. Also, recent court cases have resulted in decisions against medical personnel for inadequate pain control.

Solution

Here are some suggested steps to take to address this problem.

- Pain is defined as an unpleasant feeling or a state of discomfort that can range from mild to severe.
- Pain is subjective – pain is simply what a patient says it is.
- People have a wide range of reactions to pain; some hide it, not wanting to accept its existence, while others distress over what appears to be a minor injury. What is an insignificant nuisance to one patient is a crippling event to another.
- Nurses must accept the patients’ impression of their pain and treat it effectively.
- Some nurses choose to administer pain medication according to their own impression of the patient’s pain; if the patient appears to be relaxed and comfortable, the nurse may not administer the medication as quickly as when a patient is in distress. This approach should be avoided – every patient has the right to adequate and prompt pain relief; a patient’s level of pain cannot be assessed by appearance alone.
- Pain is now considered as the fifth vital sign and should be assessed at least once every shift for presence and degree of pain.
• One successful method of pain assessment is the Numeric Pain Scale that allows the patient to rate his/her pain from 0 to 10, with 0 being no pain and 10 being the most severe pain.

• Another scale that is useful with non-English-speaking and nonverbal patients is the Faces Pain Rating Scale; it uses six faces with varying expressions from smiling to tearful to rate the patient’s pain.

• Patients who are unresponsive or unable to answer questions can be assessed by physical assessment signs such as monitoring vital signs, observing facial expressions, protecting a body area, massaging, and agitation and moaning.

• Acute pain occurs suddenly; it is usually related to an injury or inflammation, and is usually short in duration.

• Acute pain is typically treated with a combination of pain relievers and treatment of the underlying cause.

• Chronic pain may be constant or intermittent, may or may not be related to an illness or injury, and lasts more than 6 months.

• People who have experienced chronic pain for an extended period of time may display no outward signs of discomfort when in pain.

• Treatment of chronic pain may utilize several treatment modalities, including narcotic and non-narcotic pain relievers, physical therapy, heat or cold packs, or transcutaneous electrical nerve stimulation (TENS) units.

• Repositioning a patient or providing support for an affected limb may also offer some relief.

References

Avoiding Common Nursing Errors, Lisa Marcucci, MD, Editor, Lippincott Williams and Wilkins, 2010.