

# Understanding Pain Management

## **Every patient has the right to be pain free.**

- No two people are the same. That's why you have to believe your patients when they tell you they're in pain
- Their pain is what they say it is.
- Some pain has no clear physical cause. But it's no less real for the person who is suffering.

## **Treat pain seriously.**

- Never assume a patient is not in pain just because he/she doesn't complain.
- Ask. Then re-evaluate later.
- Pay attention to facial expressions and body language.
- Age has nothing to do with the level of pain a person feels.

Notify the agency RN for assistance with management of pain.

Pain is expressed and perceived differently in various cultures, ages, and may be emotional.

There is a difference between physical dependence and addiction.

- Physical dependence means the body has learned to tolerate a certain drug and must adjust when the drug is no longer needed to relieve pain. Addiction is a psychological need for a drug that leads to physical, emotional and social harm.

Pain is acute and chronic.

Pain is scaled on faces or 1-10.

Pain may be treated alternatively and/or with medications. Some methods are:

- Medication
- Cognitive and behavioral techniques
- Exercise
- Physical agents (massage, heat, cold, etc.)

Assessment is essential in pain management. Evaluate:

- Where it hurts
- What the pain feels like (sharp, burning, aching, throbbing?)

- Severity of the pain
- How long the pain lasts (constant, intermittent?)
- What makes the pain better or worse?

It's important to take steps to relieve pain, while finding the cause of pain.

When treating pain with PRN medications, it is important to document pain before and effectiveness after.