

Loma Linda University Medical Center Home Care Services

Operating Policy

Department:Home Care ServicesCode: (495) M - 30Category:Clinical ManagementEffective: 05/31/2018Subject:Pain ManagementReplaces: 05/24/2017

POLICY SUMMARY/INTENT:

Pain Management is the process of promoting the effective assessment, diagnosis, and treatment of pain. The process of pain management incorporates a collaborative, interdisciplinary approach, which not only includes all attending health care providers, but also participation of the patient and the patient's family or support system.

DEFINITIONS:

Pain: Pain is a subjective highly unpleasant state involving a physical, neurological, or emotional response to noxious stimuli. Pain is probably the single most frequent encountered patient problem, yet is unique for each patient. Pain is what the patient says it is. Etiology or precipitating factors can include:

- 1. Existing medical conditions, disease processes, malformations or an inflammatory process
- 2. Invasive diagnostic or surgical procedures
- 3. Trauma
- 4. Chronic immobility, over-active or pressure to parts of the body
- 5. Psychogenic origins, such as hostility or a threat to the integrity of the body
- 6. Emotional issues and spiritual beliefs

POLICY:

- 1. The pain management process for the Agency will be carried out on an interdisciplinary basis, based on the scope of practice of the clinician, including all health care providers involved with the patient's care, the patient, and patient's family/support system. Pain and symptom assessments are conducted at the time of admission and on an ongoing basis, the process includes:
 - 1.1 Pain assessment, which includes pain intensity using valid and reliable evidence based pain assessment scale, wherever possible.
 - 1.2 Location(s) of pain
 - 1.3 Characteristics of pain
 - 1.4 Pain relief measure used and their effectiveness
 - 1.5 Planning and intervention for pain management

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- 1.6 Reassessment of patient responses or outcome of pain management interventions or measures
- 1.7 Patient's/family's goals for pain management and their satisfaction with the current level of pain control
- 1.8 Documentation of pain management
- 1.9 Exacerbating factors
- 2. Pain management planning will include intervening to treat pain before the pain becomes severe. The pain management goal is to control pain at an acceptable level of comfort to the patient and optimal functioning of the patient.
- 3. Collaboration of the health care team will provide the following to the patient and family on a multidisciplinary basis:
 - 3.1 Comprehensive and safe pain management
 - 3.2 Information regarding pain management options and methods
 - 3.3 Opportunity to refuse any method of pain management.
- 4. Pain assessment tools will be utilized that focus on:
 - 4.1 The treatment of the following patient populations:
 - a) Neonatal/Pediatric
 - b) Adults
 - c) Non-English speaking persons
 - d) Non-responsive persons
 - 4.2 The following criteria:
 - a) Behavioral description of the patient's pain and any influencing factors, (e.g. burning, stabbing, tingling)
 - b) History of pain and its treatment.
 - c) Environmental, cultural, spiritual, or developmental factors that relate to pain management.
 - d) Possible causes of pain such as activities, care, or treatment that precipitate or exacerbate pain.
 - e) Onset location and radiation of pain.
 - f) Intensity or degree of pain as measured on a standardized pain scale.
 - g) Duration, frequency, and timing of pain.
 - h) Strategies and factors that reduce pain

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- i) Impact of pain on quality of life, (e.g. sleeping, functioning, appetite, mood).
- j) Physical symptoms which include but are not limited to:
 - j.1 Nausea and vomiting
 - j.2 anorexia
 - j.3 constipation
 - j.4 anxiety
 - j.5 restlessness
 - j.6 dyspnea
 - j.7 dehydration
 - j.8 skin breakdown
 - i.9 sleep disorders
- 5. Pain Intensity Scales. Three types of intensity scales will be used for patients to determine the intensity of their pain:
 - 5.1 Numeric Pain Intensity scale from "0" no pain and "10" severe or worst possible pain.
 - 5.2 Face Pain Intensity Scale, which is to be used as an alternative pain assessment tool for variation in developmental levels, age, language, or culture.
 - 5.3 PAINAD for adult patients with dementia.
- 6. Pain assessment frequency and patient comfort outcomes are monitored on a routine basis:
 - 6.1 Pain will be assessed each visit.
 - 6.2 The patient/family/ caregiver will be involved in the development of an individual pain management plan for the patient's comfort.
 - 6.3 The patient/family/caregiver will be instructed in methods of pain management. They will also be instructed to notify the Agency and/or their primary physician for any unresolved pain issues.
 - 6.4 If pain intensity remains above a level 7 on the pain scale used, or is unacceptable to the patient, the physician will be contacted for additional orders to provide other comfort measures. They will be implemented according to the pain management plan for that patient.
- 8. The effectiveness of pain management is to be reassessed to determine if alternative pain management measures need to be implemented or the physician contacted for additional orders.
 - 8.1 The effectiveness of pain management interventions will be assessed each visit as

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appropriate.

Pain management will be reassessed after subsequent interventions until pain is controlled or within the patient's stated tolerance.