

PAIN MANAGEMENT

Reasons to suspect pain

- Is the resident very tense or guarding in a particular area?
- Are they moving less than usual?
- Do they have a sad facial expression or are they grimacing?
- Are they calling out more than usual or much quieter?

Where is the pain?

What is the history of pain?

What is the past medical history

Consider other causes PINCH ME

P PAIN
I INFECTION
N NUTRITION
C CONSTIPATION
H HYDRATION
M MEDICATION
E ENVIROMENT

Any history of pain?
Arthritis /Rheumatism,
Malignant disease,
Digestive condition,
Circulation problem,
Recent fall / injury

Any recent surgery?
Give the prescribed pain relief
Check the wound site for signs
of infection, swelling or
discolouration.

Is this a new pain?
Ask the resident about the pain
Where is it?
When did it start?
Is it constant or does it come and go?
Use appropriate pain scale

Use Clinical
Judgement
and manage
symptoms

- Check the resident's prescription and give the prescribed analgesia
- Monitor and review in 1-4 hours, repeat as directed,
- Monitor and review in 24- 48 hours
- If recent fall check neuro obs and any injuries and refer as appropriate

Use clinical judgement and consult with
Senior Nurse Management and or most
appropriate clinician available

If no improvement

