

Pain Assessment and Management

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One Size Does NOT Fit All

We know pain management is not a one size fits all practice. An individual's perception of pain varies, the ability to communicate pain may vary and measuring pain is vastly complex. The resident with dementia may need to be assessed differently than the short stay rehabilitation resident. Using the appropriate pain scale and educating patients on medications is key. Accurately assessing pain = improved pain management.

Pain Management Resources

Adult Non-Verbal Pain Scale (NVPS)

Observation	Behavioral Indicator	Behavioral Indicator	Behavioral Indicator
Facial Expression	Facial Grimacing	Facial Grimacing	Facial Grimacing
Vocalization	Moaning	Moaning	Moaning
Body Position	Restlessness	Restlessness	Restlessness
Physiologic Response	Increased Heart Rate	Increased Heart Rate	Increased Heart Rate

Behavioral Pain Scale (BPS)

Behavioral Indicator	Score
Facial Grimacing	0-2
Moaning	0-2
Restlessness	0-2
Increased Heart Rate	0-2

Defense and Veterans Pain Rating Scale 2.0 (DVPRS)



The Numeric Pain Rating Scale Instructions

Demographic:
The patient is asked to make three pain ratings, corresponding to current, best, and worst pain experienced over the past 24 hours.
The average of the 3 ratings was used to represent the patient's level of pain over the previous 24 hours.

Pain Assessment in Advanced Dementia (PAINAD) Scale

Behavioral Indicator	Score
Facial Expression	0-2
Vocalization	0-2
Body Position	0-2
Physiologic Response	0-2

[Adult Non-Verbal Pain Scale](#)

[Behavioral Pain Scale](#)

[Defense and Veterans Pain Rating Scale](#)

[Numeric Pain Scale Rating Instructions](#)

[Pain Assessment in Advanced Dementia Scale](#)



Pharmacists Corner

Do you have a pain committee? Do you include your consulting pharmacist in your meeting?

Tip: Your consultant pharmacist can assist to review and recommend medication management options to best meet the needs of the individual resident.

Things to Consider

Assess pain at different times of the day.

Involve family in the conversation.

What are the residents pain goals?

Do you have an updated care plan with pain goals?

What are the resident's beliefs about pain?

What are contributing factors to pain?

Assess the residents comfort level with non-pharmacological methods of pain relief.



Scan the QR code or visit www.mpqhf.org/QIO for more resources.