PAIN

Definition: Pain is a personal experience influenced by biological, psychological and social factors (such as culture and coping strategies). Pain is what the person says it is. It is possible to have more than one pain over multiple sites and for it to be more than physical.

OBSERVE

Signs and symptoms

People use different words to describe pain – sharp, dull, shooting, stabbing, burning, crushing, heavy, aching, pulling, tender, cramping, tight, throbbing, punishing, frightening

Behaviour change

- Increased confusion
- Declining to eat/drink
- Resistant to care

Physical change

- Sweating, flushed or pale skin, change in mobility
- Check vital signs (temperature, pulse, blood pressure, respiration, oxygen saturations)

IDENTIFY

Non-verbal responses to pain

BREATHING
Changes – loud, heavy, fast

VOCALISATION
Sighing, moaning or groaning, calling out, crying

FACIAL EXPRESSION
Frightened, sad, frowning, grimacing, clenched teeth

BODY LANGUAGE
Quiet, worried, distressed, anxious, agitated, fidgeting, pacing, holding, rubbing or guarding a body part, rocking, clenched fists, pulling or pushing away, striking out

Types of pain

EMOTIONAL
- Anger/anxiety sadness/loss
- Fear
- Loss of body image

SPIRITUAL
- Meaning of life
- Culture
- Religion/beliefs
- Helplessness

SOCIAL
- Relationships
- Roles
- Cultural
- Attitude

PHYSICAL
- Illness
- Side effects of medication, fatigue, lack of sleep

ACTION

Assessment

- **Tell me about your pain** (listen to the resident's story and note the language used)
- **Where is it?** Get the resident to show where the pain is on their body. "Is this new pain or old pain? What does it feel like?"
- **How bad is the pain?** Use the pain rating tool in your facility to assess and document pain
- **Does the resident have communication problems** (eg, language barrier, hearing or speaking difficulties, dementia) that mean they cannot tell you about their pain? Use your facility's non-verbal pain tool
- **What makes the pain better or worse?**
- **Ask family/whānau about previous pain episodes**

RECORD

Document in progress notes/update care plan

RECORD

CARE AND MANAGEMENT OF RESIDENT

- Check care plan for pain management
- Is there a cause for the pain that can be treated (eg, UTI, constipation, recent fall)?
- Has there been a new injury (eg, bruises, skin tears, recent fall)?
- Check pain medication has been given
- Assess if medication has worked

NON-MEDICATION TECHNIQUES

- What has helped ease pain in the past?
- Supportive talks/reassurance/validation
- Distraction; music, TV, talking therapy
- Gentle touch
- Keep the person moving: Repositioning and pressure relief
- Dim lights and reduce noise
- Rest and support sleep
- Heat or cold packs – check with the registered nurse
- Massage, aromatherapy, relaxation, breathing techniques, pet therapy or rongoā (traditional Māori medicine)
- Offer spiritual support or prayer (if appropriate)
- Comfort extras (eg, fiddle mitt, comfy blanket)