

Memorial Hospital	DATE 	IMPRINT WITH PATIENT LABEL
PAIN MANAGEMENT FLOW SHEET		

PATIENT EDUCATION: Purpose of pain scale - to assess / communicate pain Selection of pain scale <input type="checkbox"/> 0 - 10 <input type="checkbox"/> Faces <input type="checkbox"/> WD Pt comfort goal selected _____ # Notify staff of poor pain relief	INITIALS: _____ _____ _____ _____	PATIENT EDUCATION: Rationale for PCA Use of Bolus dose button Notify Staff of alarm Notify Staff of motor / sensory loss (local anesthetics)	INITIALS _____ _____ _____ _____
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0 - 10 SCALE: No pain Moderate pain Worst pain FACES: WORD DESCRIPTOR: (WD) 0 No Hurt 2 Hurts Little Bit 4 Hurts Little More 6 Hurts Even More 8 Hurts Whole Lot 10 Hurts Worst	PCA Drug: _____ Loading dose: _____ mg, mcg, cc Concentration: _____ mg / cc _____ mcg / cc _____ % PCA dose: _____ mg, mcg, cc Lockout: _____ minutes 1 hour limit: _____ mg, mcg, cc 4 hour limit: _____ mg, mcg, cc Continuous rate: _____ mg / hr, mcg / hr, cc / hr
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① PAIN SCORE 0 - 10 P - Prior to Therapy / Intervention AS - Asleep *Behavioral - Record in Nursing Notes / Comments Section	0600 ④ IV - PCA: Document pain, sedation assessment and RR every 2 hours on even hour. 0800 1000 EPIDURAL PCA: Document pain, BP, P and sedation level every 4 hours. Document motor and sensory levels every 4 hours if receiving local anesthetics. 1200 MOTOR LEGEND: 1400 1 - Moves against resistance 1600 2 - Moves against gravity 1800 3 - No Movement 2000 SENSORY LEGEND: 2200 1 - Full sensation 2400 2 - Tingling of lower extremities 0200 3 - Numbness of lower extremities 0400 4 - Numbness above umbilicus 5 - Numbness above xiphoid Epidual PCA: Call Acute Pain Service / Anesthesia for any questions or information. Non-PCA: Document pain assessment every shift and as needed.	⑤ PAIN REASSESSMENT GUIDELINES: IV Push - 30 minutes IM - 60 minutes PO - 60 minutes Suppository - 60 minutes PCA and IV Infusion - 15 - 30 minutes after dose change ⑥ SIDE EFFECTS N - Nausea P - Pruritus CS - Constipation CNF - Confusion R - Urinary Retention RD - Respiratory Depression V - Vomiting * -
② SEDATION LEGEND (RAMSEY SCALE) 1. Patient anxious, agitated or restless. 2. Patient cooperative, oriented and tranquil. 3. Patient responds to vocal commands only. 4. Patient asleep. Responds to gentle shaking or loud auditory stimulus. 5. Patient asleep. Does not respond to gentle shaking or loud stimulus, but responds to pain. 6. Patient unarousable. Does not respond to pain or noxious stimulus.	③ NON-PHARMACOLOGICAL MEASURES 1 - Ice / Heat 2 - TV / Radio / Read 3 - Family Visits 4 - Position / Elevate 5 - Splinting 6 - Emot. Support 7 - Massage 8 - Guided Imagery 9 - _____ 10 - _____	

Date	Time	Pain Score ①	Sedation ②	Respiratory Rate	Pain Location	Non-Pharmacologic ④	Drug / Dose / Route	⑤ IV / PCA / Epidural PCA Peripher Nerve Infusion			⑥ Pain Reassessment		Side Effects ⑦	Initials
								PCA	PCA	PCA	Time	Pain Score		

IV PCA: Clear the history at the end of shift (1800 - 0600) to allow a new medication record for the next shift.

