

Mary Greeley Medical Center  
Administrative Operational Policy  
**Pain Management**

**POLICY:**

Pain is assessed in all patients utilizing a pain rating scale that is consistent with the scope of care, treatment and services and the patient's condition.

Pain management interventions are individualized and implemented based on assessment and the least invasive and safest route.

**PURPOSE:**

The purpose of pain assessment and reassessment is to monitor effectiveness of pain medication and to monitor the patient's safety.

**PROCEDURE:**

Initial Assessment:

- Pain rating and pain goal will be documented within four hours of admission to medical center and with any onset of new pain.

Ongoing Assessment:

- Pain assessment will be documented a minimum of once per shift.

Reassessment:

- To assess pain management effectiveness, pain after intervention is compared with patient's pain goal.
- Timing and requirements for reassessment documentation after medication depends on route of medication and whether medication is an opioid (See Documentation Section below for description of required documentation).
- Patient safety with use of pharmacologic interventions is monitored with the use of the Respiratory Depression Score and the Acute Care Team (ACT) Score at MGMC. Refer to the Acute Care Team (ACT) Guideline.

## **DOCUMENTATION:**

### **Pain Assessment:**

- Pain Rating
- Pain Location
- Pain Goal
- Level of Consciousness (for opioids)
- Respirations (for opioids)

### **Pain Reassessment:**

Reassessment of pain for pharmacologic interventions will be documented within 30 minutes for intravenous therapy and within 60 minutes for all other routes of pain medication, and includes:

- Pain Rating
- Level of Consciousness (only after opioids)
- Respirations (only after opioids)

### **Note on Pain Rating Scales**

There are a number of pain rating scales available depending on the needs of the patient. They are verbal numeric rating scale, FACES pain assessment tool, FLACC behavioral pain assessment scale, Neonatal infant pain scale, Critical Care Pain Observation Tool (CPOT) and more. When possible one scale will be used for one patient for consistency. The tool should be appropriate for the patient's developmental, physical, emotional, and cognitive status.

### **Note on Individualized Pain Interventions**

Patients may receive lesser dose or lesser strength of pain medication than what objective pain "rating" might indicate. Refer to PH615 Essential Elements of Complete, Safe, and Accurate Physician Orders for Medications.

### **Patient Teaching for Patients with Pain:**

- Discussion of all interventions available including non-pharmacological options. Link to Pain Management Lippincott
- Discussion of realistic pain goals.
- Discussion of reporting of pain level and requesting as needed medications.

**Approval:**

Pain Committee: 01/2023, 07/2024

**New:** 05/1993,

**Review Date(s):** 02/2017

**Revision Date(s):** 03/1996, 11/1997, 02/1999, 11/2000, 10/2021, 11/2021,  
10/2003, 07/2004, 01/2005, 3/2005, 12/2008, 09/2010, 11/2010, 02/2011,  
03/2011, 06/2011, 11/2012, 03/2014, 04/2014, 04/2015, 02/2016, 06/2017,  
09/2017, 01/2018, 08/2019, 11/2019, 05/2020, 03/2022, 01/2023, 07/2024