

# Caring for the Patient with Pain

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## THE FACTS ABOUT PATIENTS WITH PAIN:

Pain is hard to describe. It is a very personal experience. It is true that some people are able to deal with pain better than others. But when a patient tells you that he or she is having pain, you must accept and respect that. The most accurate indication of the presence and severity of pain is what the patient tells you. You must always report it to the supervisor, nurse, or therapist when the patient tells you he or she is having pain.

Pain is sometimes described as "acute" or "chronic." Acute pain usually comes on suddenly and is more intense. It often happens because of an injury or surgery. Sometimes it can be a warning that something is wrong, such as the pain caused by a heart attack. Patients with acute pain are more likely to tell you they are having pain. Chronic pain can be continuous or it can come and go. It can also be intense. Sometimes people with chronic pain may not tell you they are hurting since they feel it is something they have to live with. You will need to look for some behaviors that are common when people are having pain. Many of your patients have chronic pain that is better some times and worse at other times. Such diseases as severe arthritis or cancer can cause chronic pain. Chronic pain can and should be managed.

There are several reasons that patients may not actually tell you that they are having pain. Sometimes it is the way they were brought up — that pain is to be endured and that complaining about it is a sign of weakness. Others don't take pain medicines because they are afraid that if they take them now and the pain gets worse the medicines won't help anymore. Sometimes the patient doesn't want to be more of a bother to the family. Many patients are afraid of becoming addicted to the pain medication.

## HOW DO YOU KNOW IF THEY DON'T TELL YOU?

If the patient does not tell you that he or she is having pain, there are other things you can look at that may give you clues. Often when patients are having pain, they may show certain facial expressions such as grimacing, looking sad, or looking "wiped out." They may hold their hands over a certain part of the body, or gently rub the area. Sometimes they are restless and just cannot seem to get comfortable. They may have more trouble following your directions in assisting with their cares. Some patients may be less talkative than usual, or less interested in things they are usually interested in. They may moan, or cry, or even tell you they want to be left alone. Patients who are usually in a good mood may be irritable or short-tempered. If you notice these behaviors, ask the patient if he or she is having pain.

## WHAT YOU CAN DO:

It is very important that you let the nurse, therapist, or supervisor know that the patient is having pain. Report where the pain is, when it started, how the patient describes it, whether the patient has taken any medication and if so, what and when.

There may already be instructions on your assignment sheet to tell you some things to do for the patient who has pain. Here are some things that may help.

- » Practice good positioning. Make certain that the position relieves pressure and rests the area where the pain is.
- » Pace and plan the activities you need to do with the patient. You may need to go a little slower than usual.

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- » Ask the patient what has worked in the past, if he or she has had the same pain before.
- » Try to interest the patient in something. Sometimes music, or a favorite television show helps take their mind off the pain. Sometimes talking about their families or animals, or past events in their lives will help. Be very careful when trying to interest the patient in something. Some people do not want any of these things and it may make them worse.
- » Control the patient's room as much as you can. Pay attention to the lighting, the temperature, and the noise level.
- » Try giving a soothing bath. Sometimes patients feel better when they are touched, so offer to give a backrub, or gently wipe their face.
- » Be supportive. You must assume patients are having pain if they tell you they are. Do not make light of it.
- » Do not do anything that makes the pain worse unless you have been specifically instructed to do so by the nurse, therapist, or supervisor even after you have told them it makes the pain worse. If there are activities (such as exercises, or a shower) that are likely to increase the pain, call the nurse, therapist, or supervisor to report that they are increasing the patient's pain.

## REMEMBER THESE IMPORTANT POINTS WHEN TAKING CARE OF PATIENTS IN PAIN:

1. Believe patients who say they are having pain. Do not let your personal opinion decide that they are actually in pain or not.
2. Notify the nurse, therapist, or supervisor when the patient reports pain, and follow his or her direction in changing what you do for the patient on this visit.
3. Look for other signs of pain, even if the patient denies having pain. Don't be afraid to ask whether the patient is having pain.
4. Provide supportive care during your visit.
5. Document the presence of pain in your visit note, as well as the fact that you called the nurse, therapist, or supervisor to report the pain.

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## CASE STUDY: SUSAN AND DARLENE HAVE PATIENTS WITH PAIN

Susan is visiting Mrs. Sampson, an elderly lady with rheumatoid arthritis. This morning Mrs. Sampson seems quiet and withdrawn. She says she didn't sleep much last night because of the pain in her hips and back. Susan says, "Well, you'll feel better after we get your exercises and shower done." Susan starts the range of motion exercises and Mrs. Sampson asks her to stop because it is making her pain worse. Susan responds, "Well, you know the best thing is to just keep going," and continues the exercises. Mrs. Sampson starts to cry. Susan tells her, "You know, crying is not going to help anything. The pain can't be all that bad and you should be used to it by now. I need to get you done so I can be on time for my next patient." She insists that all the cares on the assignment must be done, and hurries with the shower, and helps Mrs. Sampson get dressed. When she leaves the home, Mrs. Sampson is still crying softly. Susan documents the cares she did for Mrs. Sampson, packs up her things, and goes on to her next patient.

Darlene is visiting Mrs. Story, also a patient with rheumatoid arthritis. The first thing she notices is that Mrs. Story looks exhausted. She asks her how she is doing and Mrs. Story says, "Fine." Darlene quickly notices that Mrs. Story is not her usual self — she seems distracted and doesn't talk much. Darlene sees her grimace a time or two. She asks Mrs. Story directly, "Are you having a lot of pain today?" Mrs. Story admits that she has been having a lot of pain all night, but she doesn't want to bother her family, since "they have enough on their minds without worrying about me."

Darlene tells Mrs. Story that she is going to call the nurse to tell her about the pain. When she talks to the nurse, she also asks whether it will be all right to give Mrs. Story a bed bath today instead of a shower. The nurse tells Darlene that it's a good idea, and that she should not do her exercises this morning. The nurse then talks with Mrs. Story and encourages her to take one of her pain pills, and tells her that she will come to see her tomorrow.

Darlene asks Mrs. Story if she would like for her to turn on the radio to her favorite station. She plays the radio softly and turns off the overhead light. She then gives Mrs. Story a soothing bed bath, followed by lotion and a good back rub. She assists Mrs. Story in positioning herself. She tells Mrs. Story that she understands how draining it can be to have pain, but reminds her how important it is for the nurse and doctor to know when she is having pain so that it can be managed. When Darlene is ready to leave, Mrs. Story is more relaxed and says she thinks she will be able to take a little nap. Darlene documents on her visit report about the pain, notifying the nurse, why she gave a bed bath instead of shower, and why the exercises were not done. She packs up her things and goes on to her next patient.

## SOMETHING TO THINK ABOUT

Compare Susan's visit with Darlene's. List some of the things Susan should have done for Mrs. Sampson. What are the most important things Susan failed to do? Think about some of your patients who have chronic pain. List ways you can improve what you did during those visits. List some of the things you need to write on your visit report about patients with pain.

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DIRECTIONS: READ EACH QUESTION CAREFULLY. THEN, DETERMINE THE BEST ANSWER. CHECK THE CORRESPONDING BOX ON YOUR ANSWER SHEET. DO NOT WRITE ON THIS POST-TEST.

1. What is the most accurate indication of pain and how severe it is?
  - a. When the patient is crying with the pain
  - b. What the patient tells you about the pain
  - c. Whether or not the patient is being uncooperative with cares
  - d. When the patient shouts at you
  
2. Which of the following is true about reporting pain to the nurse, therapist, or supervisor?
  - a. There is no need to report the pain if the patient has taken his or her medicine.
  - b. You do not need to report pain if you think the patient is just whining and doesn't really have pain.
  - c. You need to report pain only if you need to change what is on the assignment sheet.
  - d. You should always report the pain the patient is having.
  
3. Which of the following behaviors may indicate a patient is having pain?
  - a. Restlessness
  - b. Doing crossword puzzles or other activities
  - c. Singing or humming
  - d. Sleeping
  
4. What is something you might do that may help patients having pain?
  - a. Position comfortably.
  - b. Give a soothing bath.
  - c. Control loud noises or bright lights.
  - d. All of the above
  
5. The most important thing about chronic pain is that it can never be managed.
  - a. True
  - b. False
  
6. Which of the following must you always do when the patient tells you he is having pain?
  - a. If you don't believe it, tell him just not to worry about it.
  - b. Tell him he should not take pain medicines or he will get addicted to them.
  - c. Accept and respect that he is having pain if he says he is.
  - d. Believe him only if he has other signs of having pain.

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7. When you begin to do range of motion on a patient, she tells you it is making the pain in her leg worse. What should you do?
- Notify the nurse, therapist, or supervisor and follow his or her direction.
  - Continue the exercises since they are on your assignment.
  - Stop the exercises, but chart that you did them.
  - Do all the exercises except the legs.
8. You should look for signs of pain, even if the patient does not tell you he or she is having pain.
- True
  - False
9. Which of the following is true about chronic pain?
- It is never as bad as the patient says it is.
  - It can be continuous or it can come and go.
  - Patients will always tell you if they have chronic pain.
  - All of the above
10. Which of the following behaviors might you see in patients who are having pain?
- Holding their hands over parts of the body
  - Crying
  - Being less interested in things they are usually interested in
  - All of the above

-END-

# MONTHLY INSERVICE ANSWER SHEET

In-service Month \_\_\_\_\_ Year \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

1. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

2. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

3. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

4. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

5. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

6. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

7. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

8. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

9. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_

10. a. \_\_\_ b. \_\_\_ c. \_\_\_ d. \_\_\_