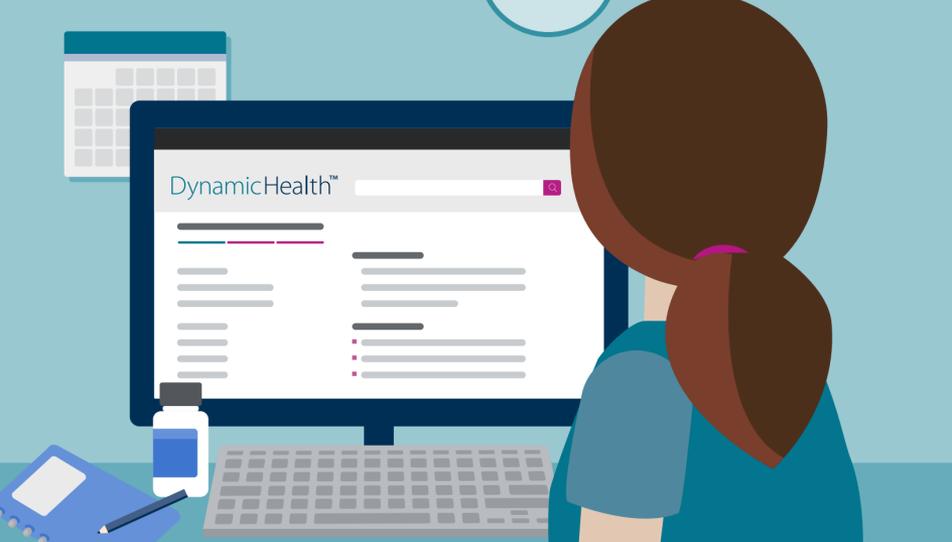


# Pain Management in Older Adults

## Are Your Nurses Checking All the Boxes?

Pain management in older adults promotes control or alleviation of acute or chronic pain from various causes, while avoiding adverse effects of analgesic medications. The problem of breakthrough pain is particularly important in frail older adults because physiologic stress due to pain may compromise medical outcomes. Persistent pain has been shown to cause or increase depression, anxiety, and sleep disturbance; decrease quality of life; increase use of medical services; and increase health care costs. Both acute and chronic pain can affect mental status and cause delirium in older adults. Effective pain management decreases emotional and physiological stress, improves the rate of healing among patients with acute pain, and improves the long-term quality of life in those experiencing chronic pain.

Check out the *Dynamic Health*™ competency checklist below to see if your nurses are checking all the boxes when it comes to their pain management skills as they relate to older adult patients.



## PRE-PROCEDURE STEPS

- 1. Review the facility/unit-specific protocol for managing pain in older adults
- 2. Review the treating clinician's orders, noting orders for pharmacologic agents
- 3. Review the patient's medical history/medical record
- 4. Verify completion of facility informed consent documents, if necessary
- 5. Check the orders and care plan
- 6. Review the manufacturer's instructions for all supplies to be used, and verify that they are in good working order
- 7. Maintain level of infection precautions, as appropriate
- 8. Provide privacy for the patient
- 9. Identify the patient
- 10. Introduce yourself
- 11. Explain the procedure
- 12. Perform hand hygiene according to facility protocol, and don personal protective equipment (PPE), as appropriate
- 13. Assess general health status, including pain level and provide prescribed analgesic, if necessary, before proceeding
- 14. Recruit other staff members to assist as necessary



## PROCEDURE STEPS

- 1. Check the patient's medication administration record (MAR) to see the last time the patient received an analgesic agent
- 2. Administer the prescribed analgesic (typically non-opioid analgesics for pain that is mild to moderate in intensity and opioid analgesics for pain that is severe), if appropriate
- 3. Review the MAR to verify the "rights" of medication administration
- 4. Verify that the drug has not expired
- 5. Adhere to prophylactic analgesic administration schedule, as prescribed
- 6. Monitor for verbal and/or nonverbal indicators that pharmacologic therapy is effective
- 7. Use a facility-approved pain assessment tool to monitor treatment efficacy
- 8. Collaborate with the treating clinician to titrate the analgesic dose upward, if necessary, for continued pain behaviors, until a therapeutic effect is observed, side effects occur, the maximum safe dosage is reached, or no benefit is apparent from the treatment
- 9. Collaborate with members of the multidisciplinary team to identify other possible causes of pain behaviors that persist despite medication increase
- 10. Evaluate appropriateness of nonpharmacologic pain relief options in light of patient's mental/cognitive status, reserving relaxation, guided imagery, and controlled breathing for use in older adults who are able to understand and cooperate with verbal instructions
- 11. Provide distraction techniques to draw attention away from physical sensations during painful procedures
- 12. Provide gentle massage appropriate to the affected body part/injury
- 13. Assess the impact of body position on the patient's pain. Promote comfort by assisting the patient into positions that offset pressure on the affected body part, as appropriate
- 14. Provide emotional support to aid in relaxation and minimize the perception of pain
- 15. Encourage family members and other support persons to provide emotional support



## POST-PROCEDURE STEPS

- 1. Properly dispose of used procedure materials and PPE
- 2. Perform hand hygiene
- 3. Reassess the patient's level of pain frequently and adjust the pain management plan based on reassessment findings
- 4. Monitor the patient for adverse reactions to medications, including central nervous system (CNS) depression and allergic reaction
- 5. Monitor the patient for medication toxicity by following prescribed orders for laboratory testing of blood. Review test results and consult the treating clinician if drug levels reveal toxicity.

## Like what you saw?

There's lots more where this came from. *Dynamic Health*, an innovative new evidence-based tool, offers thousands of actionable clinical skills and accompanying competency checklists to help nurses and allied health professionals master critical skills. Users will find current, relevant, evidence-based information on core nursing competencies, transcultural care, patient training, occupational therapy, speech therapy, nutrition and dietetics, social work and so much more.

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