Pain Module

Patient Education

Patient Education

- All patients are to be educated about pain assessment and management.
- Patients are considered partners in their care; therefore education is two-sided. The patient's opinion about how to manage his/her pain should be considered in the development of assessment and plans to manage pain.

Patient Education Resources

- The BHSF publication, Partners for Quality
 Healthcare A Guide for Patients and Their
 Families, has a pain section and this pamphlet
 should be given to all patients.
- A more detailed *Pain Tips Sheet* is available on the intranet under Departments, Pain Management.
- Micromedex has analgesic and PCA patient information.

Patient Education Materials

✓ New or revised patient education materials are to be written in an understandable manner and appropriate to the patient's abilities.

✓ Any new or revised materials should be approved by the entity's Pain Council and shared with all the entities if appropriate.

In-hospital care—What to teach?

- Explain the use of the 1-10 pain scale and other pertinent assessment points.
- Explain if pain/discomfort is expected and how it is going to be treated.
- Teach patient/loved ones about opioid-related respiratory depression—risk factors, effect on breathing, what to report (sedation, changes in respiration).
- Provide the med name, time interval (atc or prn), route, how it works, possible side-effects, etc. If prn, explain what this means.
- Encourage patients to ask what drugs are being prescribed and why.
- Teach patients to promptly report side-effects and unrelieved pain.
- PCA pumps
 - Ask family to alert nurse for changes in level of consciousness/sedation or anything else unusual.
 - Explain why only the patient is to press the button (unless nurse/family-administered med is approved)

Discharge—What to teach?

- Educate patients to always ask if a new medicine is to replace a current medication e.g., Percocet when they have been on Vicodin or a different NSAID from one they have been on.
- Educate patients & caregivers to read the labels on all OTC and prescription medicines:
 - to be sure that the medicine is right for him/her (not allergic, etc)
 - to be familiar with the ingredients
 - to be aware of the recommended dosage
 - to make sure there have been no mistakes made in preparing the drug (prescription meds)
 - to know if the med should be taken with food
 - to know if the med is compatible with other meds he/she might be taking
- Advise patients not take more than the label says and/or use for longer than directed because taking too much of any pain reliever can lead to serious health risks, even death.
- Advise patients that alcohol can enhance the effects of certain prescription drugs as well as markedly increase potential toxic side effects (such as liver damage when used in conjunction with acetaminophen).
- Encourage patients to keep a legible list of all medications and to carry the list at all times.

Discharge—What to teach (2)

Include the following:

- Safe storage of meds to keep from children and secure from being stolen.
- The proper way to take their pain medicine.
 - patches (location, changing the patch, no heat to patch, check that patch is still on periodically, check level of consciousness/sedation)
 - pills (prn vs. atc, time-released vs. immediate release, <u>do not</u> cut or crush time/controlledrelease meds, w or w/o food, driving, check level of consciousness/sedation)

Discharge—What to teach (3)

- The common side-effects of pain medications and how to prevent and manage them.
- When to call the doctor about pain or sideeffects.
- Disposing of unwanted and outdated meds.

Documentation of Patient Education

Comprehension of patient education is to be evaluated and documented on the *Interdisciplinary Patient Education Record*.