

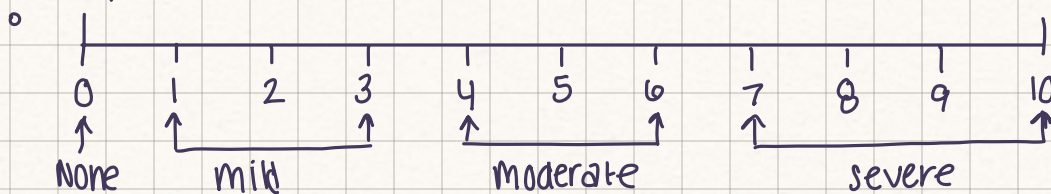
- Subjective cues → symptoms
- Objective cues → signs

- Health literacy
 - time constraints
 - language, age, & cog. level
 - values & beliefs
 - attitudes
- } factors impacting pain assessment

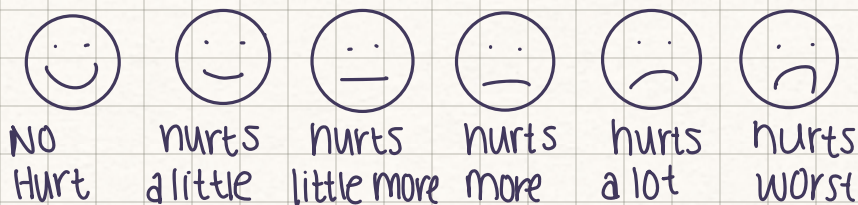
SOCRATES

- Site → Where
 - Onset → When, how fast
 - Character → quality of pain
 - Radiation → where else
 - Associations → signs & symptoms
 - time course → pattern to when
 - relieving factors → what helps
 - Severity → 0-10 pain scale
- } What to assess when assessing patient pain

0-10 pain scale



Universal pain assessment tool



Neonatal infant pain scale

- assesses facial expression, crying, breathing, & state of arousal
- scores > 3 indicate pain

Pain assessment in Advanced Dementia (PAINAD)

- Assesses breathing/vocals, negative vocals, facial expressions, body language, & consolability.
- scored 0-10

◦ Cardiovascular

- Acute pain → increase heart rate & increased systolic pressure.
- Chronic pain → decreased heart rate & decreased systolic pressure.
- increased myocardial oxygen demand
- increased vascular resistance
- hypercoagulation
- chest pain

◦ Respiratory

- increased respiratory rate
- increased bronchospasms
- Pneumonia
- Atelectasis

◦ Gastrointestinal

- delayed bowel emptying
- decreased intestinal motility
- Constipation
- Anorexia
- weight loss

◦ Musculoskeletal

- muscle spasms
- increased muscle tension
- impaired mobility
- weakness
- fatigue

◦ Endocrine

- fever
- shock

◦ Genitourinary

- decreased urine output
- urinary retention
- fluid overload
- hypokalemia

◦ Neuro/Sensory

- Acute pain → rapid speech, dilated pupils
- Chronic pain → slow speech, constricted pupils.
- Pallor & diaphoresis

- Immune

- Impaired immune function
- infection