

Pain Management Competency

**City of Hope National Medical Center
Duarte, California**

**Developed by:
Division of Nursing
Department of Nursing Research and Education**

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PAIN MANAGEMENT COMPETENCY

Competency Statement: The oncology nurse in the inpatient, outpatient, and home health setting implements the Oncology Nursing Society (ONS) Comfort Standard and the Agency for Health Care Policy and Research (AHCPR) Guidelines in the care of the oncology patient with pain.
Performance Criteria Date

ASSESSMENT

I. Pain History

1. Where is your pain?
2. Onset and pattern (When did the pain start, how often does it occur, how has it changed?).
3. Description (describe your pain).
4. Intensity (rating scale).
5. Aggravating and relieving factors (what makes it worse? what makes it better?).
6. Current/previous treatment (What are you doing for your pain? How is it working?).
7. Effect (How does it affect your physical and social functioning?).
8. Treatment compliance (How are you taking your pain medication?).

II. Physical Exam

1. Physiological:

Cardiac

Pulmonary

Renal/GU

GI (mucositis, diarrhea, nausea and vomiting, constipation, nutrition)

Neurologic

Vascular

Discomfort/Pain (i.e. pruritus, N/V)

Performance Status (mobility, activities of daily living, sleep patterns, fatigue)

Integumentary (condition of skin)

2. Lab Profile

CBC, Diff, Platelets, Chemistries

III. Psychosocial Evaluation:

1. Behavioral Observations (distorted posturing, impaired mobility, guarding the painful area, anxiety, depression, facial expression, vocalizations and attention seeking).

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1. Developmental and educational level (last year of school completed).
2. Coping Mechanisms (support system, emotions, cultural, spiritual).
3. Assess patient's/family/caregiver's knowledge, beliefs, misconceptions regarding pain management, (i.e. fear of addiction, cultural issues).

IV. Ratings of Pain Intensity and Relief

1. Discuss the goal of pain management with the patient and negotiate an acceptable level of pain.

INTERVENTIONS

1. Identifies and uses appropriate pain rating scale for the patient.
2. Teach the use of a developmentally appropriate pain rating scale to the patient.
 - a. 0-10 Numerical scale (0=no pain, 10=worst pain possible).
 - b. Faces Pain Rating Scale.
3. Includes patient and family in management of pain.

4. Notify the MD of new and/or unmanaged pain.
5. Administers medication in an appropriate and safe manner:
 - a. verifies orders, dose, patient, time and route.
 - b. checks patient's allergies/sensitivities.
 - c. checks food and drug interaction.
 - d. checks level of consciousness and vital signs according to hospital policy and or patient situation (pre/post procedures, continuous infusions).
 - e. demonstrates knowledge of hospital policy and procedure for specific drugs (i.e. verification with RN/Pharmacist, and use of conscious sedation).
6. Uses and instructs clients and family about non-pharmacologic interventions when appropriate (i.e. heat, cold, massage, range of motion, repositioning, relaxation).
7. Instructs client and family on correct use of and correct management of medication, side effects (i.e. scheduling, sedation, confusion, safety, nausea and vomiting) and who to call if problems occur.
8. Provides clients and family with pain management resources (i.e. pain management book, support groups, community resources).
9. The nurse will consult with and make referrals to ancillary services as needed (PRNs, pharmacist, supportive services, pastoral services, etc.).
10. Communicates and documents nursing assessment, intervention and outcome.
11. Describes methods to reverse opioid induced respiratory depression (i.e. Naloxone, Narcan, mazicon).

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EVALUATION

1. The nurse continually evaluates the effectiveness of pain control measures using the pain scale, patient satisfaction, and caregiver satisfaction on a continual basis.
2. The nurse evaluates the patient/caregiver(s) understanding of:

- a. pain control options both pharmacological and non pharmacological.
- b. teaching such as pain scale, management of side effects, etc.
- c. importance of communicating changes in pain pattern, fears, side effects, etc.
- d. pain management regimen and importance of compliance to regimen.
- e. who to call if problems occur.

Note: The format of this form may be altered from the original for use on the Website. All data is the same.