

Remember to **TARGET** Chronic Pain

T

Talk to your patients about pain.

A

Ask about current and past treatments and Assess risk.

R

Review daily pain intensity and patterns and adjust treatment plan as needed.

G

Get details about breakthrough pain.

E

Evaluate limitations on activities.

T

Treat side effects.



American Pain Foundation

A United Voice of Hope and Power over Pain

PROVIDE YOUR PATIENTS WITH OPTIMAL PAIN CARE, WHILE ALSO PROTECTING YOUR PRACTICE.

Use this Checklist to Treat Chronic Pain:

- Conduct a history and physical exam.
- Establish a diagnosis.
- Screen for psychosocial issues, including substance abuse.
- Consult with other treating providers, if appropriate.
- Devise overall treatment plan, including an appropriate exit strategy.
- Document in chart informed consent and a treatment agreement, if needed.
- Periodically reevaluate patients and review treatment plan at whatever interval is appropriate or mandated by law.
- Document treatment outcomes in chart.
- Provide referrals when necessary.

FOUR “A’s” OF PAIN TREATMENT OUTCOMES

Analgesia – Is the pain relief clinically significant? Is there a reduction in the pain score (0-10)?

Activity levels – What is the patient’s level of physical and psychosocial functioning? Has treatment made an improvement?

Adverse effects – Is the patient experiencing side effects from pain relievers? If so, are they tolerable?

Aberrant drug-taking behaviors – Does the patient show signs of addiction? Are there any behaviors that are worrisome such as early refills or lost medication? What is your plan of action?

Source: Passik & Weinreb, 1998; Passik & Portenoy, 1998

Take every opportunity to educate patients about opioids, including the differences between tolerance, physical dependence and addiction, and discuss risk. When prescribed by a healthcare professional and taken as directed, opioids are safe and effective, and rarely lead to addiction.