



A Patient/Family Guide to Pain Management

**University of Mississippi
University Hospitals and Clinics
2500 N. State Street
Jackson, MS 39216**

Why do I need special pain management?

Knowing that each patient is unique, our goal is to provide the safest and most effective method of pain control that best fits your needs. Pain treatment is vital, not only because it relieves discomfort, but also because it reduces complications and speeds recovery.

Pain Control: What are the options?

There are numerous techniques available to us to control your pain. The therapy we implement for you depends on many factors, including your age, the nature of your illness and your current condition. Both medication and non-medication treatments can be successful in helping to prevent and control pain. The most common methods of pain control are described below-you and your doctors and nurses will decide which ones are right for you.

Pain Control Methods

A. Medication

Several routes can be used to administer pain medication which include:

- Orally - Pills can be highly effective, even in treating severe pain, and are preferred whenever possible. However, pain pills usually cannot be used until you are able to eat and drink and so usually cannot be used immediately following surgery.

- Injection - An injection is a "shot" of medication that is usually given into a muscle.
- Skin - Skin patches containing pain medications are applied to the skin and used for longer term management of pain.
- Intravenous (IV) - Patient Controlled Analgesia (PCA) - PCA is a safe method that allows patients to give their own IV pain medication with the push of a button. Pain medicine is given into an IV by a computerized pump that is set to meet your needs. We program the pump to allow you a dosage which will provide comfort without risk of overmedicating yourself. The control button will be placed where you can easily find it. The great advantage is the rapid pain relief with no painful shots.
- Epidural - An epidural is a small catheter placed in your back by an anesthesiologist. Pain medicine is given into the catheter by a computerized pump that is set to meet your needs. Most people think about epidural pain relief for women in labor. Epidurals are now being used for pain control during recovery from many surgical procedures as well.

B. Other pain control methods

Non-drug methods of pain control also include massage, hot or cold packs, positioning, splinting of an incision, relaxation, music or other pastimes to distract you, prayer and positive thinking.

How to communicate your pain

We ask that you help your doctors and nurses to measure your pain. They may ask you to rate your pain on a scale of "0 to 10" on the scale which best describes your pain. Reporting your pain as a number helps the doctors and nurses know how well your treatment is working and whether to make any changes.

0 - 10 Numeric Pain Intensity Scale

0	1	2	3	4	5	6	7	8	9	10
No					Moderate					Worst
Pain					Pain					Pain

- Do not worry about being a bother. The nurses and doctors want and need to know about your pain.
- Do not assume the doctors or nurses know that you are having pain.
- Take your pain medication or ask the nurse for pain medication when the pain starts. This is a key step in proper pain control.
- Take pain medication prior to getting out of bed, walking, or doing breathing exercises if these activities worsen your pain. It is harder to ease pain once it has taken hold.
- If you are still having difficulty with managing your pain, you may request that your doctor consult the Pain Management Team. This is a group of physicians who specialize in pain management. They may make recommendations or changes in your medications to better control your pain.

**Statement on Pain
Assessment and Management**

***All patients have a right
to pain assessment and management.***

Health care providers will:

Inform patients at the time of their initial evaluation that pain assessment and management is an important part of their care.

Ask patients on initial evaluation and as part of regular assessments about the presence, quality, and intensity of pain.

Use the patients' self report as the primary indicator of pain.

Work together with the patient and other health care providers to establish realistic goals for pain management.

Develop and implement a plan to achieve pain management goals.

Respond to reports of pain as quickly as possible.

Review and modify the plan of care for patients who have unrelieved pain.

Anesthesiology-Pain Management Center
in cooperation with the
Pain Performance Improvement Team
The University of Mississippi Medical Center
Jackson, MS 39216-4505

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