

### What is Procedural Pain?

- Pain that occurs during a procedure or afterwards.
  - Like all pain it is individual with the patient being the only judge of how it feels and how they react.
  - The patient's current state of physical health or emotional well being also has an effect.

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### Procedural pain

- Tissue, muscle, and nerves are damaged.
- Pain is caused by the release of chemicals from damaged cells, the inflammatory response, and damaged neurons.
- The patients' perception of pain does not necessarily correlate with the amount of damage however an increase in damage will likely increase the likelihood of pain.

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### Outcomes

- The same procedure done twice may have different outcomes depending on:
  - Skill of the person doing the procedure
  - Length of the procedure
  - Complications of the procedure
  - Anesthetic used
  - Analgesic used
  - Previous patient experience

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### What are Procedures?

- IV/ port accessing/Needlesticks of any sort
- Biopsies.
- Chest tube insertion/removal
- Paracentesis
- Thoracentesis

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### Procedures

- Pleuredesis
- Chest tube insertion and removal
- Minor surgeries
- Stitches
- Dressing changes
- Those other times

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### Why is there a problem?

- Education
  - Providers
  - Patients
- Lack of empathy
- Lack of reassessment or follow-up

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**Why is there a problem?**

- Opioidphobia
- Order sets
  - One size fits all
  - Lack of pre-assessment

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**Medications for Procedural Use**

- Acetaminophen
- NSAIDs
- Sugar water/ pacifiers (infant only)

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**Medications for Procedural Use**

- Opioids
  - Vicodin
  - Percocet
  - Oxycodone
  - Fentanyl
  - Morphine
  - Hydromorphone

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**Medications for Procedural Use**

- Anesthetics
  - Lidocaine
  - Bactrostatic Normal Saline
  - Tetracaine

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**Medications for Procedural Use**

- Off label uses
  - Pregabalin
  - Lidoderm patches
  - Morphine Insyte Gel

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**Off Label**

- Use or route was not officially approved by FDA.
- Evidence may exist for use or route
  - Evidence may be strong or weak
- Use may be anecdotal
- Insurance companies may not pay for an off label use.

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**Preventative Steps IVs, Ports, & other Needlesticks**

- Use a topical anesthetic cream or a local interdermal anesthetic.
  - EMLA
  - Numby
  - Synera (new)
  - Zingo (new)
  - Lidocaine hydrochloride 1%
  - Sodium Chloride with benzyl alcohol

Yvonne D'Arcy Evidence Based Nursing Care Guidelines; Medical Surgical Interventions 2007

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**Non-pharmacological Interventions**

- Ice/cold packs
- Cognitive therapies
  - Guided imagery
  - Meditation
  - Relaxation/breathing

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**Nonpharmacological**

- Support patients usual pain coping mechanisms (prayer, meditation)
- Facilitate use of home/folk remedies unless counter indicated.
- Music Therapy
  - EBP

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**Pain & Dressing Changes**

- Premedicate
- Avoid cytotoxic agents
- Avoid aggressive packing
- Avoid drying out wound or wound bed

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**Pain & Dressing Changes**

- Use warm cleansing solutions
- Protect periwound area
  - Skin protectant, barriers
- Careful removal of dressings and residue
- Avoid tape on fragile skin
- Montgomery straps if appropriate

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**Pain & Dressing Changes**

- Consider Ostomy appliance for heavily draining wound
- Reduce anxiety

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**Pain & Dressing Changes**

- Monitor for pain during the intervention(s)
  - Provide analgesia as needed when repositioning
- Minimize daily dressing changes
- Use atraumatic dressings

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**Guidelines**

- Existing Guidelines
  - NCCI
  - Chapter on Procedural Pain in McCaffery & Pasero's *Pain a Clinical Manual, 2<sup>nd</sup> Edition*
  - Individual Institution Policies

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**Best Practice in Nursing**

- The term best practice is a generic or general phrase for a process of infusing nursing practice with research-based knowledge.

The John Hartford Center of Geriatric Nursing Excellence

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