

Adult inpatient acute pain management guide

Documented pain score Assess pain on movement e.g. deep breathing, coughing, mobilising Is the patient functioning?	Frequency of monitoring pain score	Acute pain management at ward level Use morphine with caution in patients with renal impairment Refer to specific guidance for hepatic/renal impairment	Inpatient Pain Team (IPT) involvement
0w (NO PAIN) 1-3 (MILD PAIN) Or FAS Option A	As per NEWS score	Prescribe simple regular analgesia Paracetamol +/- NSAID if not contraindicated <u>PRN</u> morphine (pain protocol on WellSky) Assess response 30 minutes after PRN dose if given	No involvement of IPT
4-7 (MODERATE PAIN) Or FAS Option B	Hourly	As above + consider adding regular dihydrocodeine and laxatives Give PRN morphine - Monitor response 30 minutes after PRN dose given Ensure parent team are aware of patients pain; consider a clinical review *Tramadol may be used where dihydrocodeine ineffective or poorly tolerated	Consider referral to IPT if pain persistent after these measures (Please refer on Nervecentre)
8-10 (SEVERE PAIN) Or FAS Option C	Hourly	Continue prescribed analgesia + PRN morphine - Monitor response Ensure patient reviewed by parent team If no improvement after 2 hours then refer/contact IPT	IPT to review patient (Please refer on Nervecentre and bleep if needed urgently)

The aim of analgesia is that patients are able to FUNCTION (e.g. able to mobilise with manageable pain)

Functional Activity Scale (FAS) should be used to assess impact of pain - See Nervecentre

Persistent pain scores of 4 -10 – despite analgesia need review by parent team before contacting IPT

Ensure this pathway is actioned **BEFORE** patients are referred. [Please complete ALL sections of Nervecentre referral.](#)

The IPT is available for all severe and complex acute and acute on chronic pain problems. All other pain problems need the parent team to take early and appropriate responsibility.

SPECIALIST PAIN STAFF ARE AVAILABLE:

MON – FRI 08:00 – 16:00

DBTH IPT

Doncaster and Bassetlaw Teaching Hospitals

Inpatient Pain Team

DRI: Bleep via Alertive (1449) - 08.00 – 16.00

BDGH: Bleep via Alertive (3107) - 08.00 – 16.00

Evenings/Weekends/Bank holidays: Bleep DRI 2nd on-call

Anaesthetist via Alertive (1195) for urgent acute pain problems only

