ELNEC- For Veterans
END-OF-LIFE NURSING EDUCATION CONSORTIUM

Palliative Care For Veterans

Module 2
Pain Management

PARTICIPANT OUTLINE
Module 2: Pain Management
Participant Outline

I. INTRODUCTION
   A. Definitions
   B. Status of pain relief in serious illness

II. BARRIERS TO PAIN RELIEF
   A. Importance of defining barriers to improve pain management
      1. Identify where obstacles exist
      2. Develop solutions to overcome barriers-
   B. Specific barriers
      1. Healthcare professionals
      2. Healthcare system
      3. Patients/families
   C. Strategies to overcome barriers
      1. Education of healthcare professionals
      2. Address system-based issues
      3. Education of patients and families
   D. Guidelines
   E. Role of culture
   F. Ethical implications in providing pain management

III. GOALS IN PAIN ASSESSMENT
   A. Pain and symptom control
      1. Provide sense of control
      2. Relieve caregiver burden
      3. Optimize quality of life
   B. Pain versus suffering at the end of life
   C. Patients at-risk for under treatment of pain
      1. Older adults
      2. Non-verbal or cognitively impaired persons/unconscious patients
      3. Patients who deny pain
      4. Non-English speaking
      5. Cultural considerations
      6. Persons with a history of substance use disorder
   D. Pain assessment
      1. Location
      2. Intensity
      3. Quality
      4. Temporal factors
      5. Aggravating/alleviating factors
      6. Past and current therapies
      7. Meaning of pain
      8. Associated symptoms
      9. Function
10. Risk assessment
11. Goals of care
E. PQRST
E. Physical examination
F. Laboratory/diagnostic evaluation
G. Reassess
I. Communicating assessment findings

IV. PHARMACOLOGICAL THERAPIES
A. Nonopioids
   1. Acetaminophen
   2. Nonsteroidal antiinflammatory drugs (NSAIDs)
B. Opioids
   1. Mechanism of action
   2. Specific concerns
   3. Adverse effects
   4. Definitions
      a. Substance use disorder
      b. Tolerance
      c. Physiological dependence
C. Opioid epidemic
D. Adjuvant analgesics
   1. Antidepressants
   2. Anticonvulsants
   3. Local anesthetics
   4. Corticosteroids
   5. Cannabis
E. Routes of administration
   1. Oral
      a. Immediate-release tablets/capsules
      b. Long-acting (sustained-release) tablets/capsules
      c. Liquid
   2. Transmucosal
      a. Buccal
      b. Sublingual
      c. Nasal
   3. Rectal
   4. Transdermal
   5. Topical
   6. Parenteral
      a. Intravenous
      b. Subcutaneous
      c. Intramuscular (not recommended)
   7. Spinal
      a. Epidural
      b. Intrathecal
V. PRINCIPLES OF PAIN MANAGEMENT  
A. Using long-acting and breakthrough medications  
B. Rotating opioids  
C. Converting from one route or drug to another  
D. Caring for people with substance use disorder  

VI. CANCER THERAPIES USED TO RELIEVE PAIN  
A. Radiation  
   1. External beam  
   2. Radionuclides  
B. Surgery  
C. Chemotherapy  
D. Hormonal therapy  
E. Other therapies  

VII. INTERVENTIONAL TECHNIQUES  
A. Neurolytic blocks  
B. Neuroablative procedures  
C. Vertebroplasty/kyphoplasty  

VIII. NONPHARMACOLOGICAL TECHNIQUES  
A. Physical measures  
B. Psychological approaches  
C. Complementary and integrative therapies  

VIII. CONCLUSION  
A. Suffering/existential distress  
B. Meaning of pain  
C. Interprofessional approach