#### **CHEAT SHEET**

### **MANAGING WOUND PAIN**

#### **Summary**

Pain represents a major issue for patients suffering from many different wound types and its reduction has the potential to improve patients' quality of life, expedite the healing process, minimise the length of stay in hospital and the cost on the healthcare system (Price et al., 2007; Snelgrove and Baileff, 2019).

#### **Assessment**

Holistic patient assessment is essential to assess the wound pain. Asking questions to the patient (where applicable), will enable the registered healthcare professional to understand the pain location, any triggers, what the pain feels like.

The OUH Trust has implemented a 0-3 Pain Scale to assess pain severity both at rest and during movement. The scale ranges from 0 (no pain) to 3 (severe pain). Additionally, the Functional Activity Score (FAS) is used, with a range from A (no functional limitations due to pain) to C (patient unable to deep breathe due to pain).

A wound pain assessment should be undertaken each time that a dressing-related procedure is carried out and documented. The information gathered will then contribute to plan an effective pain management strategy.

#### **Management**

## Pain Assessment

Assess pain and impact on quality of life through holistic patient assessment and by using appropriate pain assessment scales.

# Non-pharmacological

- Reduce anxiety.
- Adequate wound cleansing.
- Appropriate strategies during wound dressing change (e.g. gentle wound handling, use of adhesive removers...).
- Select wound products appropriate for the type of wound

# Pharmacological

- Preventative analgesia (e.g. need for an immediate release medication 30-60 mins prior to wound dressing change).
- Pain Management Guidelines on Eolas Medical app.
- Refer to OUH Pain Management Service, if required.

#### For further information:

**TV Wound Management** 

**Pain Team**