

## Children's Hospital, LHSC Paediatric Chronic Pain Program Referral Guidelines

## **Inclusion Criteria:**

- Under 17 ½ years with chronic pain as the primary complaint
- Chronic pain for at least 3 months or lasting less than 3 months for patient experiencing complex severe acute pain, suspected neuropathic pain or complex pain medication wean/titration
- Investigations to identify etiology of pain have been completed
- Pain refractory to traditional management strategies
  - o commonly used analgesics, physical or psychological therapies
- Chronic pain significantly impacts activities of daily living
  - o school attendance, sleep, mood, quality of life and/ or family functioning
- Primary/referring physician agrees to collaborate in ongoing pain management follow-up
  including writing medication prescriptions when indicated and transition planning

## **Exclusion Criteria:**

- Conversion Disorder where pain is not the primary complaint
  - o functional weakness, non-epileptic attacks, hemi-sensory symptoms
- Headache as primary pain complaint (please refer to Headache Clinic)

## **Patient Groups/Conditions Accepted:**

- Gastro-Intestinal Pain
  - o recurrent abdominal pain, abdominal pain related to genital/urinary, gynecological, postsurgical or gastroenterological disease
- Central Nervous System Pain
  - o neuropathic pain phantom limb, post-trauma, trigeminal neuralgia;
  - o complex regional pain syndromes;
  - complex refractory headache pain
- Musculoskeletal Pain
  - o back pain
  - o post-infectious, post-surgical, post-traumatic, idiopathic musculoskeletal pain
  - o fibromyalgia
- Recurrent or Chronic Pain Related to Congenital Disorders
  - cerebral palsy, sickle cell disease;
  - Duchenne's Muscular Dystrophy; other neuromuscular disorders
  - o juvenile idiopathic arthritis, Ehlers-Danlos Syndrome, osteogenesis imperfecta

Please call our program for more information if you are unsure if your patient would be suitable for referral.