

# Pain, Sedation and Delirium Screening Standards

## First: Perform Pain Assessment

- Screen all patient for pain during initial assessment
  - Consider past pain history and medications
  - Obtain self-report of pain as priority
  - If unable to self-report, use Critical Care Pain Observation Tool (CPOT)
- Reassess pain q 4 h and prn (e.g., with turning, procedures or clinical change)
- Reassess pain following administration of analgesia

## Second: Perform Sedation Assessment

- Screen all patients using VAMAAS or MAAS (unventilated patient) at the start of each shift
- Repeat VAMAAS q 4 h and before and after each prn dose of sedation

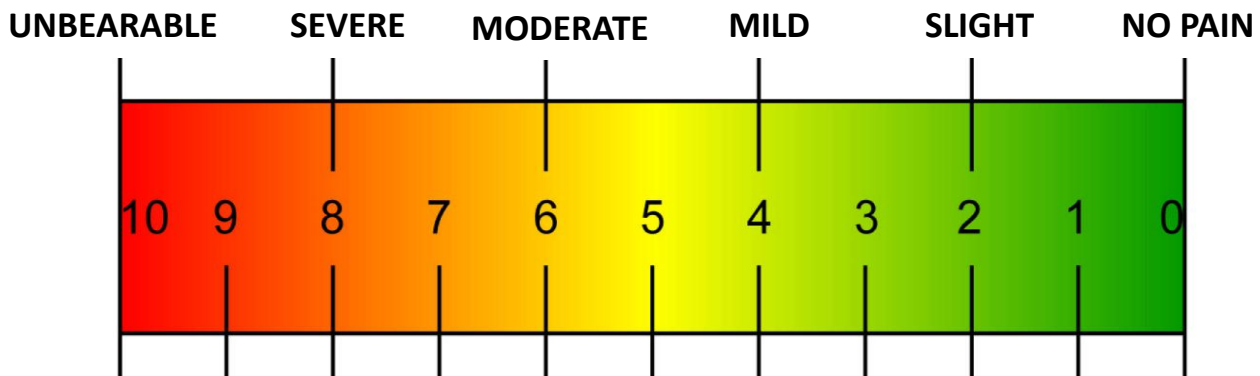
## Third: Perform Delirium Assessment

- Screen all patients with admitted for > 24 hours for delirium once per shift
- Screen in second half of shift and document time of assessment in neuro section of AI record
- Delirium screening requires pain, sedation and delirium assessment
- If MAAS is < 2 record “unable to assess” for delirium screen
- If MAAS is  $\geq 2$ , screen using Intensive Care Delirium Screening Checklist (ICDSC)

## Pain Assessment: Able to Self-Report

Patient's self-report of pain should be the primary goal for pain assessment.

- The numeric (0-10 out of 10) or visual analogue (shown below) should be included in the pain assessment whenever the patient can self-report.
- The actual score is not as important as the patient's perception of change during reassessment (worse or better).
- Whenever possible, determine the characteristics of the pain using the PQRST mnemonic (next page). This will help to identify the cause of the pain and the most appropriate treatment plan.



# Pain Assessment: Able to Self-Report

## PQRST Mnemonic for Pain Assessment

### **P (provokes, precipitates):**

- Location of pain
- What brings it on (e.g., activity, specific movement, breathing)
- What relieves it?

### **Q (quality):**

- What is the quality of the pain (in the patient's own words)
- Prompt only if necessary, to determine if pain is dull, sharp, stabbing, pins and needles, "electrical", etc.

### **R (radiation, referral):**

- Does the pain move to any other spot?
- Are there any other symptoms with the pain (e.g., nausea, vomiting, shortness of breath)

### **S (severity):**

- How does the patient rate the pain on a scale of 1-10? (use patient prompt)

### **T (time):**

- When did the pain start?
- Has this pain occurred before?
- Is the pain intermittent or constant?