













Assessing Pain in Children

In day surgery, the nurse will teach the child ways of describing his or her pain. They will go over the various ways of assessing pain with the child and family. There are three different ways we assess pain at Children's Hospital. There is the FLACC scale for infants and special needs children. Bieri Faces Pain Scale (for ages 4 to 10), and 0-10 scale for older children able to self report their pain.

Nurses can then make a decision of using non-pharmacologic or pharmacologic methods to control their patient's pain.

Non Pharmacologic

- Parent
- Comfort- animal, blanket
- Holding/Swaddling
- Distraction
- po feeds
- Music
- Dim Lights
- Ice/Heat area of injury
- Reposition-Elevation
- Warm blankets
- Massage
- · Pacifier (sweet ease)

Pharmacologic

- Morphine (iv)
- Toradol (iv)
- Dilaudid (iv)
- Benadryl
- PCA vs. Bolus
- Epidurals & Blocks
- Tylenol (pr)
- Ativan (iv)
- Zofran (iv)
- Demerol (iv) rigors
- · Valium (iv) muscle aches

| FLACC Revised | | | |
|--------------------|---|--|--|
| Category | 0 | 1 | 2 |
| Face | No Particular expression or smile | Occasional grimace or frown, withdrawn or disinterested; appears sad or worried | Constant grimace or frown; frequent or constant quivering chin, clenched jaw; distressed looking face, expression of fright or panic |
| Legs | Normal position or relaxed; usual tone & motion to limbs | Uneasy, restless, tense; occasional tremors | Kicking or legs drawn up; marked increase in spasticity; constant tremors or jerking |
| Activity | Lying quietly, normal position, moves easily; regular rhythmic respirations | Squirming, shifting back and forth, tense; tense or guarded movements; mildly agitated (head back & forth, aggression); shallow splinting respirations, intermittent sighs | Arched, rigid or jerking; severe agitation; head banging; shivering (not rigors); breath holding, gasping or sharp intake or breaths, severe splinting |
| Cry | No cry or verbalization (awake or asleep) | Moans or whimpers, occasional complaint; occasional verbal outburst or grunt | Crying steadily, screams or sobs, frequent complaints; repeated outbursts, constant grunting |
| Consol- ability | Content and relaxed | Reassured by occasional touching, hugging, or being talked to. Distractible | Difficult to console or comfort; pushing away caregiver, resisting care or comfort measures |

Italicized cues are intended to capture unique characteristics of children with developmental delays.

Differentiate

Pain, Hunger, Emergence and Anxiety

Set Goals



Welcome to the Comfort Zone

The Jane B. Pettit Pain Management Center provides pain care for children with acute or chronic pain. The Acute/Inpatient Pain Service is available to help patients who have pain while they are in the hospital. Anesthesiologists and advanced practice nurses work with patients, families, nurses, doctors and other health care professionals to keep patients comfortable.

The Chronic Pain Clinic provides outpatient evaluation and pain care services for children having chronic or longstanding pain. A team of experts will treat your child. Team members depend on your child's needs, but they may include an anesthesiologist, psychologist, family therapist, nurse, acupuncturist, physical therapist, occupational therapist and social worker.

Comfort techniques help children of all ages

Infants

Rocking, singing, soothing music, holding, gentle massage, pacifier, ask your nurse about sucrose (sugar water) prior to procedures.

Toddlers

Rocking, holding, listening to music, bubble-blowing, playing or pet therapy.

Preschoolers

Talking about the procedure, bubble-blowing, storytelling, watching movies, using distraction tools (pop-up books, toys, video games), playing or acting out the procedure or pet therapy.

School-age/young adult

Breathing techniques, visual imagery, watching movies, playing video games, listening to music, reading, massaging, explaining the procedure and answering questions or pet therapy.



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The Jane B. Pettit Pain Management Center





Kids deserve the best.

Many families worry about their child's pain and comfort. We're here to help.

At Children's Hospital of Wisconsin, our health care team can help children and families with their concerns.

"The Comfort Zone" is our pledge to families that we will make every effort to keep your child as comfortable as safely possible during every visit to Children's Hospital.

Although it may not be possible to take away all of the pain, we will do everything possible to minimize it. In addition to using pain medicine when appropriate, we will help your child cope with discomfort by using non-medication interventions such as relaxation or distraction. We also have Child Life and pet therapy available to help.

 If a needle-related procedure (intravenous or IV line, blood draw, immunization) is needed, we will help your child relax, and we may use a numbing medicine to help decrease the pain. Sometimes IVs may be placed after your child is asleep for a procedure or surgery.

- When it is best for your child, we will
 do procedures in a treatment room so
 your child feels safe in his or her own
 room and in the playroom.
- We will respond quickly to reports of pain.
- We will measure your child's pain based on his or her level of understanding.

We will support parents in their role as part of our pain team.

- We will give you information about how to best help your child before, during and after a procedure or surgery.
- Most of the time, you will be able to be with your child during procedures done outside of the operating room.
- We will give you information about pain and pain management choices.
 We will work with you to develop a plan to relieve your child's pain.
- After the procedure or surgery, we will make every effort to keep your child comfortable using the plan. We will change the plan if necessary to make your child more comfortable.

What parents can do to help

As a parent or caregiver, you know your child better than anyone else. You can help us understand when your child is in pain or uncomfortable.

Talk to your child's doctor or nurse about:

- What to expect regarding pain and pain management.
- Pain relief options for your child.
- Pain, when it first begins or is not relieved.
- · Creating a pain management plan.
- Questions you have about your child's pain management.

