

**Our Lady's Children's Hospital, Crumlin
Nursing Care plan 17b
Sickle Cell Pain**

Care plan 17b		Goals	Issue date: Review date:	March 2015 March 2018
_____ has pain _____ _____ _____		<ol style="list-style-type: none"> 1. Primary goal is to achieve effective pain control both promptly and safely. 2. Identify signs and symptoms of acute complications. 3. Patient will be pain free on discharge home. 4. Discharge patient safely. 		
Commenced, date, time and signature	No	Nursing Intervention	Discontinued, date, time and signature	
	1	Pain assessment		
		<ul style="list-style-type: none"> • Document and record pain score on arrival to ward from the emergency department. <ul style="list-style-type: none"> • Use age-appropriate pain tool <ul style="list-style-type: none"> ○ Wong Baker Faces ○ Numeric/Verbal analogue scale ○ FLACC • Ask parent what word (s) _____ uses for pain and document same • Assessment of pain- <ul style="list-style-type: none"> ○ location (s) of pain ○ severity of pain ○ character of pain-dull, sharp, burning, aching, stabbing, throbbing ○ when did pain start ○ any precipitating factors e.g. fever, dehydration ○ how did pain start-sudden, gradual ○ has the pain stopped the patient from sleeping, doing normal activities e.g. playing, going to school • If pain score is ≥ 7 assess 1 hourly until pain score is < 4 • If pain score is between 4-7 assess 1-4 hourly until pain score is < 4 • Assess pain before and after analgesia to monitor effectiveness • Monitor and record vital signs. Report any variations to haematology team 		
	2	Management of an acute painful crisis		
	a)	<ul style="list-style-type: none"> • Involve patient and their parents in the assessment and management of pain. • Observations include oxygen sats • Incentive spirometry if on opioid therapy. 		

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	b)	Non- pharmacological methods of pain management	
		<ul style="list-style-type: none"> • Use of hot packs/warm bath • Reassure patient • Fluids (IV if patient unable to tolerate an adequate oral intake). Keep an accurate fluid balance record • Involve play specialist in patients care. Use of DVDs, colouring, • Involve psychologist (as appropriate) 	
	c)	Pharmacological methods of pain management	
		<ul style="list-style-type: none"> • Regular analgesia as per sickle cell guidelines • Titration of doses according to pain score • Use of adjuvants e.g. laxatives, anti-emetics, anti-histamines • Monitor for possible side effects of treatment e.g. constipation • Opioid rotation may be necessary if patient has unacceptable side effects e.g pruritus or poor pain control despite maximum doses of therapy 	
	3	Evaluation	
		<ul style="list-style-type: none"> • Pain will be assessed and documented following interventions to relieve pain. If there is no improvement, haematology team to be informed and review patient. • Patient will be pain free prior to discharge home. • Prior to discharge home, provide information to the parent regarding the management of future pain crises <ul style="list-style-type: none"> ○ correct doses of simple analgesia-give regular doses if patient c/o pain ○ increase fluid intake-avoid dehydration ○ massage painful area ○ warm bath ○ contact hospital if pain is severe or worsens despite simple analgesia • If patient is on Hydroxyurea therapy, ensure parent has been collected bottles and syringes (stored in medication press). • Ensure parent is aware of next clinic date _____ 	