

CADTH RAPID RESPONSE REPORT: REFERENCE LIST

Timing of Pain Reassessment Post- Pharmacological Treatment Administration in Hospitals: Guidelines

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Research Question

What are the evidence-based guidelines regarding frequency and timing of pain reassessment following medication administration in hospital?

Key Findings

Three evidence-based guidelines were identified regarding frequency and timing of pain reassessment following medication administration in hospital.

Methods

A limited literature search was conducted by an information specialist on key resources including PubMed, the Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. The search strategy was comprised of both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concepts were pain assessment and timing. Search filters were applied to limit retrieval to guidelines. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2009 and July 30, 2019. Internet links were provided, where available.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

Population	In-patients with any pain
Intervention	Timing and frequency of pain assessment post pharmacological treatment administration (e.g., analgesics, opioids)
Comparator	Not applicable
Outcomes	Evidence-based guidelines
Study Designs	Evidence-based guidelines

Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Normally, health technology assessment reports, systematic reviews, and meta-analyses are presented first; however, in reports where guidelines are primarily sought, the aforementioned evidence types are presented in the appendix.

Three evidence-based guidelines¹⁻³ were identified regarding frequency and timing of pain reassessment following medication administration in hospital.

Additional references of potential interest are provided in the appendix.

Guidelines and Recommendations

1. The Royal Children's Hospital Melbourne. Pain assessment and measurement [nursing clinical guidelines]. Melbourne, Australia: RCH; 2019 Feb. https://www.rch.org.au/rchcpg/hospital_clinical_guideline_index/Pain_Assessment_and_Measurement/
Accessed 2019 Aug 01.
See: When to assess pain?
2. Assessment and management of pain [clinical practice guidelines]. Toronto (ON): Registered Nurses of Ontario; 2013 Dec. <https://rnao.ca/sites/rnao-ca/files/AssessAndManagementOfPain2014.pdf>
Accessed 2019 Aug 01.
See : Recommendation 4.1 Evaluation, page 9.
3. Winnipeg Regional Health Authority. Pain assessment and management: clinical practice guidelines. Winnipeg (MB): Winnipeg Regional Health Authority; 2012 Apr. <https://www.wrha.mb.ca/extranet/eipt/files/EIPT-017-001.pdf>
Accessed 2019 Aug 01.
See: Recommendation 6: pain reassessment – timing, page 8.

Appendix — Further Information

Non-Randomized Studies

4. Aukes DI, Roofthoof DWE, Simons SHP, Tibboel D, van Dijk M. Pain management in neonatal intensive care: evaluation of the compliance with guidelines. *Clin J Pain*. 2015 Sep;31(9):830-835.
[PubMed: PM25370139](#)

Guidelines and Recommendations

Alternative Setting – Prehospital

5. Gausche-Hill M, Brown KM, Oliver ZJ, et al. An Evidence-based guideline for prehospital analgesia in trauma. *Prehosp Emerg Care*. 2014;18 Suppl 1:25-34.
[PubMed: PM24279813](#)

Unspecified Methodology

6. Erlenwein J, Meissner W, Petzke F, Pogatzki-Zahn E, Stamer U, Koppert W. Staff and organizational requirements for pain services in hospitals : a recommendation from the German Society for Anaesthesiology and Intensive Care Medicine. *Anaesthesist*. 2019 Jul 10.
[PubMed: PM31292666](#)
7. Overcarsh P, Harvey L, Yunker A. Guidelines for monitoring patients using opioid therapy. *Clin Obstet Gynecol*. 2019 Mar;62(1):59-66.
[PubMed: PM30601143](#)
8. B.C. inter-professional palliative symptom management guidelines. Westminster (BC): BC Centre for Palliative Care; 2017. https://www.fraserhealth.ca/-/media/Project/FraserHealth/FraserHealth/Health-Professionals/Professionals-Resources/Hospice-palliative-care/Sections-PDFs-for-FH-Aug31/9524-24-FH---Sym_Guide-Pain-Mgmt.pdf
Accessed 2019 Aug 01.
See: Principles of Pain Management, bullet 4, page 8
See: Breakthrough Dosing table, page 13
9. The Joint Commission. Pain assessment and management standards for hospitals. *R3 Report*. 2017 Aug.
https://www.jointcommission.org/assets/1/18/R3_Report_Issue_11_Pain_Assessment_2_11_19_REV.pdf
Accessed 2019 Aug 01.
See: EP 7, Rationale, page 6.
10. Cone EJ, DePriest AZ, Gordon A, Passik SD. Risks and responsibilities in prescribing opioids for chronic noncancer pain, part 2: best practices. *Postgrad Med*. 2014 Nov;126(7):129-138.
[PubMed: PM25387221](#)

11. Rosenfeld RM, Schwartz SR, Cannon CR, et al. Clinical practice guideline: acute otitis externa. *Otolaryngol Head Neck Surg*. 2014 Feb;150(1 Suppl):S1-s24.
[PubMed: PM24491310](#)

Review Articles

12. Hatherley C, Jennings N, Cross R. Time to analgesia and pain score documentation best practice standards for the emergency department - a literature review. *Australas Emerg Nurs J: AENJ*. 2016 Feb;19(1):26-36.
[PubMed: PM26718064](#)

Additional References

13. Aldekhyyel RN, Melton G, Pitt MB, et al. Effects of implementing a patient interactive tool on nurse reassessment of pain documentation compliance rates. *Pediatrics*. 2018 Jan;141 (1 Meeting Abstract):4.
https://pediatrics.aappublications.org/content/141/1_MeetingAbstract/4
 Accessed 2019 Aug 01