Addressograph

Daily Pain Assessment Chart

NHS Lanarkshire

CHI No .... Hospital No .... Ward ....

Name .... Consultant .... ❑ Hairmyres ❑ Monklands ❑ Wishaw

Once daily - ask your patient: "Overall, how would you rate your level of pain during the last 24 hours - none, mild, moderate, severe or very severe?

	Date														
	Time														
	Signature														
4 very severe	4														
3 severe	3														
2 moderate	2														
1 mild	1														
0 none	0														
Please tick appropriate box if signs of opioid toxicity are present.		❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking	❑ drowsiness ❑ confusion ❑ hallucinations ❑ jerking

- every cancer patient should be asked about their pain on admission and should have a daily score recorded unless on post-op protocol
- when commencing the chart, please enter all dates along the top row

- if pain ≥ 2, an urgent reassessment of pain and review of analgesia is needed (see overleaf for guidelines)
- if pain ≥ 3 for 24 hours, or side effects of medication are apparent, consider contacting the Specialist Palliative Care Team
- reduction of pain to a level acceptable to the patient should usually be achieved within 48 hours

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