

## **Core Principles of Pain Assessment for Providers**

- Older Adults have the right to appropriate assessment and management of pain. Pain should be assessed in all older adults living in nursing homes.
- Pain is always subjective. Therefore, the older adult's self-report of pain is the single most reliable indicator of pain. The clinician needs to accept and respect this self-report.
- Physiological and behavioral (objective) signs of pain (e.g., tachycardia, grimacing) are neither sensitive nor specific for pain. Such observations should not replace resident self-report unless the resident is unable to communicate.
- Assessment approaches, including tools, must be appropriate for the older adult. Special considerations are needed for those with difficulty communicating. Family members should be included in the assessment process, when possible.
- Pain can exist even when no physical cause can be found. Thus, pain without an identifiable cause should not be routinely attributed to psychological causes or discounted.
- Different levels of pain in response to the same stimulus may be experienced by older adults; that is, a uniform pain threshold does not exist.
- Pain tolerance varies among and within individuals depending on factors including heredity, energy level, coping skills, and prior experiences with pain.
- Older adults with chronic pain may be more sensitive to pain and other stimuli.
- Unrelieved pain has adverse physical and psychological consequences. Therefore, clinicians should encourage the reporting of pain by older adults who are reluctant to discuss pain, deny pain when it is likely present, or fail to follow through on prescribed treatments.
- Pain is an unpleasant sensory and emotional experience, so assessment should address both physical and psychological aspects of pain.

### **Adapted from:**

Ersek M, Polomano RA. (In press). Nursing management of pain. (In) Lewis SM, Heitkemper MM, Dirksen SR, O'Brien P, Giddens J, Bucher L. (Eds.) Medical-Surgical Nursing: Assessment and Management of Clinical Problems, 8th Edition. Philadelphia: Elsevier.