

Comprehensive Pain Assessment in Cognitively Intact Older Adults

What is a Comprehensive Pain Assessment?

A comprehensive pain assessment elicits the older adult's subjective report of pain, including the sensory, psychologic, and emotional experiences of pain. Through a comprehensive pain assessment, the clinician begins to understand the impact of pain on the older adult's quality of life, evaluate the cause(s) of pain and develop a treatment plan.

When performing a pain assessment, use the appropriate pain assessment tools for older adults based on their preference, cognitive abilities, comprehension, and setting.

Key Considerations

- Pain is not a normal part of aging however older adults are at risk of experiencing more pain-producing disease and conditions.
- Ask about pain location and pain intensity from the older adult. Note any pain behaviors that might suggest pain is being underreported.
- Assess and address sensory impairments that complicate pain assessment (e.g., use large font, written vs spoken, adequate lighting, and hearing amplifiers).
- Incorporate the appropriate pain scale with the comprehensive pain assessment.
- Explain the pain scale recognizing some older adults may require more time.
- Discuss the older adults desired individual pain outcome(s) (e.g., improved sleep, mood, activity tolerance, awareness).
- Discuss the older adult's pain intensity goal which is often a number or verbal descriptor depending upon the assessment tool.
- Various scales are listed on the geriatripain.org website. These include, but are not limited to, the Numeric Rating Scale, Faces Pain Scale-Revised, Iowa Pain Thermometer-Revised, Verbal Descriptor Scale. These tools are valid and reliable for use in cognitively intact or those with mild cognitive impairment. The same scale should be used consistently with the older adult when evaluating the effectiveness of pain interventions.

Ask the older adult the following questions.

P = Provocation (aggravating)/Palliation (relieving): *What triggers the pain? What relieves it?*

Q = Quality: *What type of pain is it? sharp, aching, dull, burning, throbbing, crushing, numbness, feels like pins and needles, or shooting?*

R = Region/Radiation: *Where is the pain located? Does the pain radiate to other locations?*

S = Severity and Impact: *How severe is the pain? How does it affect you? Does it produce anxiety, emotional distress, insomnia, or fear? Does it limit your activities of daily living and ability to be social with others?*

T = Timing: *How long has the pain been present? Is it acute or persistent? What is the frequency and duration? Are you ever awakened by it? Has the pain changed in description or intensity in the last week?*

Location: Identify pain locations and type of symptoms on the diagram in [ID Pain: A Neuropathic Pain Screen](#).

A aching

B burning

C cramping

D dull

N numb

S stabbing

Ss sharp

T tingling (pins/needles)

Tt throbbing

Type of pain:

___ Nociceptive (joint/soft tissue/muscle) ___ Neuropathic (burning/pins/needles/neuropathy)

___ Nociplastic or Mixed

Pain in last 24 hours:

___ No pain ___ Mild pain ___ Moderate pain ___ Severe pain ___ Worst pain possible

Pain Medication History:

Describe medications the older adult has taken and how effective or ineffective they have managed their pain.

Plan of Care:

The plan of care needs to be individualized to the older adults' needs and reevaluated to determine effectiveness using the same initial assessment tool. The following links provide [Low-Risk](#) and [High-Risk](#) interventions to select and use in the plan of care.

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References

Pepa C. (2023) Pain Management and Alternative Health Modalities in Gerontological Nursing Competencies for Care. Mauk, K. 5th Ed. Pg. 835-867. Jones and Bartlett Learning, Burlington MA. ISBN: 978-1-284233-36-0

Reuben, D. B., Herr, K. A., Pacala, J. T., Pollack, B. G., Potter, J. F., Selma, T. P. (2023). *Geriatrics at your fingertips*. (25th ed.). The American Geriatrics Society. ISBN: 978-1-886775-77-0

Schofield, P., & Abdulla, A. (2018). Pain assessment in the older population: what the literature says. *Age and ageing*, 47(3), 324–327. <https://doi.org/10.1093/ageing/afy018>