

Pain Relief (mild to moderate) Standing Order

Issue date:		Review date:	
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This standing order is not valid after the review date. The review date is one year after the date the order was signed by the issuer.

Standing Order Name	Pain relief- mild to moderate
Rationale	To provide prompt and appropriate pain relief in the acute setting.
Scope (condition and patient group)	Children and adults who are presenting with distress and discomfort due to pain.
Red Flags	Suspected infection Recent significant trauma
Assessment	1. Assess patient for <ul style="list-style-type: none"> • Location of pain • Cause of pain • Intensity of pain and patients current pain score <ul style="list-style-type: none"> ○ Does the intensity change • Character of pain <ul style="list-style-type: none"> ○ Eg: Radiating, throbbing, sharp, burning • Duration of pain <ul style="list-style-type: none"> ○ Eg: intermittent or continuous • Effect of pain on activities <ul style="list-style-type: none"> ○ Eg: sleep, mobility • Other contributing factors
Indication	1st line pain relief
Medicine	Paracetamol
Dosage instructions	<u>Adult</u> : 1000mg FOUR times daily if required. <u>Child</u> : 15mg/kg FOUR times daily if required
Route of administration	Oral
Quantity to be given	60 x 500mg tablets or 200mLs of suspension (either 120mg/5mL or 250mg/5mL)
Contraindications	Liver failure
Precautions	<ul style="list-style-type: none"> • In elderly or frail patients THREE times daily dosing may be sufficient. • Do not take with other paracetamol containing products. • Maximum: 4 doses in 24 hours
Indication	Anti-inflammatory pain relief in those patients that have an inflammatory component to their pain or in combination with other pain relief
Medicine	Ibuprofen
Dosage instructions	<u>Adult</u> : 400mg THREE times daily if required <u>Child 3 months–12 years</u> : 5–10 mg/kg THREE times daily if required <u>Child 1–3 months</u> : 5 mg/kg THREE times daily if required
Route of administration	Oral
Quantity to be given	40 x 200mg tablets or 200mLs x 100mg/5mL suspension
Contraindications	Avoid in renal failure Hypersensitivity to aspirin or any other NSAID Severe heart failure; Active, recurrent or history of gastro-intestinal ulceration or bleeding especially if NSAID induced Pregnancy Combination with ACE & diuretic in the elderly

Precautions	<ul style="list-style-type: none"> • Elderly • Cardiac impairment or Ischaemic heart disease • Uncontrolled hypertension • Heart failure • Increased risk of bleeding with warfarin and dabigatran therefore requires discussion with Medical or Nurse Practitioner • Peripheral artery disease • Cerebrovascular disease
Indication	Moderate pain relief when addition of codeine is needed
Medicine	Codeine phosphate 15mg
Dosage instructions	Take ONE to TWO tablets up to FOUR times daily if required for pain.
Route of administration	Oral
Quantity to be given	12 x 15mg tablets
Contraindications	Acute respiratory depression Conditions where inhibition of peristalsis should be avoided Use of monoamine oxidase inhibitors in the last 14 days Not recommended in children due to the number of non-metabolisers
Precautions	<ul style="list-style-type: none"> • Maximum: 120mg in 24 hours • Advise patient regarding constipation (see constipation standing order for laxatives) • Advise patient regarding sedation • Dependence may occur with prolonged use • Caution advised in patients with a history of drug dependence or drug seeking behaviour
Additional information	At all times you must be aware of what other pain relief the patient may have taken before presenting (prescribed, OTC, illegal). The above pain relief can be combined depending on the severity of the pain. Depending on the cause of pain, patients may benefit from heat packs, cold presses, compression, elevation, rest or continued movement. Beware of those patients seeking drugs of abuse, such as codeine.
Follow-up	Ask patient to return if pain is not controlled, worsens or symptoms change.
Countersigning and auditing	Due to the addition of codeine within this Standing Order, countersigning is required within 48 hours .
Competency/training requirements	All nurses working under this standing order must be signed off as competent to do so by the issuer and have had specific training in this standing order.
Supporting documentation	Healthpathways at www.healthpathways.org.nz Best Practice Journal at www.bpac.org.nz New Zealand Formulary at www.nzf.org.nz Individual medicine data sheets at www.medsafe.govt.nz Standing Order Guidelines, Ministry of Health, 2012 Medicines (Standing Order) Regulations 2012 (Standing Order Regulations)
Definition of terms used in standing order	None

Medical Centre or Clinic:	
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Signed by issuers

Name: _____

Signature: _____

Title: _____

Date: _____

Nurses operating under this standing order

Only Registered nurses working within the above medical centre or clinic are authorised to administer medication under this standing order.

We the undersigned agree that we have read, understood and will comply with this standing order and all associated documents.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____