

# BRIEF PAIN ASSESSMENT

## 0-10 Pain rating scale

Nurses are very persistent about getting a number rating for pain.

**Let me give you a way of working the numbers out.**

They need to know about your own pain as a **subjective measurement**; “how bad is this for me right now”. It’s a snapshot at that moment, and you are not comparing **types** of pain.

When working it out, 0 is no pain, and 10 is worse than you have ever felt before. You’re not worrying about if you might *ever* feel worse. Just – have I ever felt this much pain before?

If it’s not a 0 or a 10, the next question is:

“Compared with what I’ve felt before, is this pain mild, moderate or severe?”

- **mild** tends to be defined as “I can still do stuff, it just hurts when I do”
- **moderate** is “this is *really* interfering with stuff I want to be able to do”
- **severe** is “this is probably the only thing I can focus on right now”

And then, to get a number out of that, you think, “So if this is moderate (for example), is it closer to mild, closer to severe, or neither – right in the middle of moderate?”

So then you have:

**mild** = 1 (present, but almost nothing), **2, 3** (bordering on affecting my daily living);

**moderate** = 4 (interfering with stuff, but not unbearable), **5, 6** (really starting to get so I can’t do much);

**severe** = 7 (could probably force myself to do stuff if it was really urgent), **8, 9** (it’s not that I haven’t *ever* been in more pain, but it’d be close).

## PQRST Pain Assessment.

This gives a general idea of the pattern of your pain, which can give a lot of information to the healthcare provider and help them to get to the cause of your pain.

**P: (Provoking and palliating factors).** What makes it worse, and what makes it better?

**Q: (Quality).** How would you \*describe\* your pain. This information can really help the healthcare professional to understand what’s going on. Different types and causes of pain have different descriptors associated with them. (See over page for descriptive term suggestions)

**R: (Radiation).** Does the pain move? Does it shoot along a nerve, or has it shifted since it began (e.g. started in your back and moved to your side, etc)

**S: (Severity)** – this is where you put the pain rating you worked out earlier. If you’re still unsure, just decide whether it’s mild, pretty bad, or really bad.

**T: (Timing).** Is the pain there all the time? Only when you move? Worse when you wake up or when you’ve been awake for some time? Has it improved or gotten worse since you first felt it?

Armed with this quick self-assessment, you should be able to explain things to the health care professional in a way they understand.

## Words to describe pain

Aching	Piercing	Stinging
Cramping	Pinching	Stretching
Crushing	Prickling	Superficial/shallow/surface
Deep	Pulsing	Tearing
Dull	Radiating	Tender
Excruciating	Sharp	Throbbing
Gnawing	Shooting	Tight
Heavy	Sickening	Tingling
Hot or burning	Splitting	Tiring or exhausting
Intense	Squeezing	Waves
Nagging	Stabbing	Wrenching