

Pain Assessment Role Playing Exercise

Adapted from:

IMPROVING END-OF-LIFE CARE A RESOURCE GUIDE FOR PHYSICIAN EDUCATION

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PAIN ASSESSMENT

ROLE PLAYING EXERCISE

Faculty Guide

1. Review and discuss the **Pain Management** teaching outline.
2. Ask students to form pairs and distribute the role playing exercise.
3. Students should spend 5-7 minutes role-playing. The "patient" and "physician" should then independently complete an evaluation form and discuss their impressions of the interview. If there is time, have the students switch partners and change roles so everyone has the opportunity to role-play the "physician".
4. Debrief the experience with the entire group--good points, bad points, what worked well, what was less effective, what did they learn that they would apply in their work, etc.
5. You may choose to demonstrate your technique at this type of discussion using the case and choosing one student to play the role of the patient.

CASE BLUEPRINT

Purpose of Case: Complete a verbal pain assessment

Training Level: Medical students, post-graduate trainee, or faculty

Simulated patient name: Mr./Mrs. Smith

Diagnosis: Pain, possibly cancer-related

Setting: Hospital room

Time allotted: 7 minutes

PATIENT PROFILE

MEDICAL HISTORY

You are Mr. Smith, a 35 y/o admitted to the hospital because of severe back pain. You describe the pain as a constant dull aching pain over the mid to lower spine. You occasionally have shooting pain down your left leg. You hurt more if you stand. You have had the pain for 3-4 weeks but it became more severe in the last week. It is now a "10" on a 0-10 point scale. You have not been able to get out of bed the past two days except to go the bathroom. Your left leg feels a little weak, but you have not fallen.

You have been taking Percocet, 2 tabs, off and on when the pain "gets really bad" - about 4-5 times a day for the last 2 days. The Percocet takes your pain partially away (to a 7/10) for about an hour - it takes an hour for you to notice that it has started working at all. You hate taking pills so you are hoping that the physicians can do something to take the pain away. A heating pad has been helpful when the pain gets severe.

You had a localized melanoma removed from your thigh one year ago—you were told "we got it all". You have been working full time since then but have missed the last week of work because of the pain. The pain wakes you at night when you try to turn over in bed. You haven't had much appetite - you think that's because of the pain pills. You live with your spouse. This is a very scary experience for you. You are beginning to wonder if it is "all in your head", or if it could be related to the melanoma.

You are in the hospital to find out what's going on and to get help with your pain. You would like to have your pain controlled enough so that you can sleep and go back to work. Your pain relief goal is improved mobility.

SOCIAL/FAMILY HISTORY

You are married and have 2 children, age 4 and 8. You work as a real estate agent. Your parents are alive and well, you have no siblings; you do not smoke or drink alcohol.

SETTING

You are in a hospital room sitting in a chair next to your bed. You should appear mildly anxious and uncomfortable, rubbing your back and leg frequently.

TASK

Your partner, in the role of a physician, will perform a verbal pain assessment.

INFORMATION FOR PHYSICIAN

MEDICAL HISTORY

You are a physician caring for a 35 y/o, Mr/Mrs. Smith, admitted to the hospital with increasingly debilitating back pain of unclear etiology. You prescribed Percocet when he first called your office about the pain last week.. Today he called saying his Left leg was weak--you arranged for a direct admission to the hospital.

The patient has a history of localized melanoma one year ago, no evidence of local-regional or distant metastases.

SETTING

You are seeing the patient in the inpatient hospital room. The patient will be seated in a chair.

TASK

Complete a verbal pain assessment.

EVALUATION FORM
ROLE-PLAYING EXERCISE--PAIN ASSESSMENT

Check off the items completed during the pain assessment interview.

- Pain quality
- Pain location
- Pain temporal pattern/duration
- Exacerbating/relieving activities
- Analgesic history
- Other strategies that help
- Impact on sleep/rest
- Emotional state
- Support systems
- Pt. asked to name goal of pain relief ¹
- Pt. asked what they believe pain is from

Overall Impression—was the physician able to perform an adequate verbal pain assessment?

YES or NO, needs more training

¹ Either numerical goal (0-10 scale) or functional goal (improved sleep).