

HealthPartners Care Coordination  
Clinical Care Planning and Resource Guide  
**CHRONIC PAIN**

The following evidence-based guideline was used in developing this clinical care guide: National Institute of Health (NIH- National Institute of Neurological Disorders and Stroke), Mount Sinai Beth Israel Division of Palliative Care, and American Chronic Pain Association

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**Documented Health Condition:** Chronic Pain, Persistent Pain

**What is Chronic Pain?**

Chronic or persistent pain can be described as ongoing or recurrent pain, lasting beyond the usual course of acute illness or injury healing, more than 3 to 6 months, and which adversely affects the individual's well-being. Pain signals keep firing in the nervous system for weeks, months, even years. There may have been an initial mishap -- sprained back, serious infection, or there may be an ongoing cause of pain -- arthritis, cancer, ear infection, but some people suffer chronic pain in the absence of any past injury or evidence of body damage. Common chronic pain complaints include headache, low back pain, cancer pain, arthritis pain, neurogenic pain (pain resulting from damage to the peripheral nerves or to the central nervous system itself), psychogenic pain (pain not due to past disease or injury or any visible sign of damage inside or outside the nervous system).

Generally, there are 3 types of pain: Nociceptive pain (somatic or visceral) which is pain caused by tissue damage; Neuropathic pain which is pain caused by nerve damage; and Psychogenic pain which is pain affected by psychological factors.

**Common Causes of Chronic Pain**

The most common sources of pain stem from [headaches](#), [joint pain](#), pain from injury, and backaches. Other kinds of chronic pain include [tendinitis](#), [sinus](#) pain, [carpal tunnel syndrome](#), and pain affecting specific parts of the body, such as the shoulders, pelvis, and neck. Generalized muscle or [nerve pain](#) can also develop into a chronic condition. Chronic pain may originate with an initial trauma/injury or infection, or there may be an ongoing [cause of pain](#). However, there may also be no clear cause. Other health problems, such as fatigue, sleep disturbance, decreased appetite, and mood changes, often accompany chronic pain. Chronic pain may limit a person's movements, which can reduce flexibility, strength, and stamina. This difficulty in carrying out important and enjoyable activities can lead to disability and despair.

**Diagnosis and Clinical Indicators**

Pain is a very personal and subjective experience. There is no test that can measure and locate pain with precision. So, health professionals rely on the patient's own description of the type, timing, and location of pain. Defining pain as sharp or dull, constant or on-and-off, or burning or aching may give the best clues to the cause of the pain.

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Your doctor will also perform a [physical examination](#), and may order [blood](#) tests or X-rays. [Tests](#) used to diagnose the cause of pain may include:

- CT or CAT Scan
- MRI
- Discography
- Myelograms
- EMG
- Bone Scans
- Ultrasound

## **Signs and Symptoms**

The symptoms of chronic pain include:

- Mild to severe pain that does not go away
- Pain that may be described as shooting, burning, aching, or electrical
- Feeling of discomfort, soreness, tightness, or stiffness

Pain is not a symptom that exists alone. Other problems associated with pain can include:

- [Fatigue](#)
- Sleeplessness
- Withdrawal from activity and increased need to rest
- Weakened immune system
- Changes in mood including hopelessness, fear, [depression](#), irritability, [anxiety](#), and stress
- Disability

## **Treatment and Self-Care**

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The treatments for [chronic pain](#) are as diverse as the causes. From over-the-counter and [prescription drugs](#) to mind/body techniques to [acupuncture](#), there are a lot of approaches. But when it comes to treating [chronic pain](#), no single technique is guaranteed to produce complete pain relief. Relief may be found by using a combination of treatment options.

Examples of some medications used to treat pain (Over the counter and Prescription):

- Tylenol (Acetaminophen)
- NSAIDS (Ibuprofen, Aspirin, Naproxen)
- Percocet (Oxycodone and Acetaminophen)
- Vicodin (Hydrocodone and Acetaminophen)
- Valium (Diazepam) (Anti-anxiety)
- Cymbalta (Duloxetine) (Musculoskeletal pain)
- Celebrex (Celecoxib) (Prescription strength NSAID)

### *Physical Therapy and Exercise*

Physical therapy helps to relieve pain by using special techniques that improve movement and function impaired by an injury or disability. Along with employing [stretching](#), strengthening, and pain-relieving techniques, a physical therapist may use, among other things, TENS to aid treatment.

Although resting for short periods can alleviate pain, too much rest may actually increase pain and put you at greater risk of injury when you again attempt movement. Research has shown that regular [exercise](#) can diminish pain in the long term by improving muscle tone, strength, and flexibility. [Exercise](#) may also cause a release of endorphins, the body's natural painkillers. Some exercises are easier for certain chronic pain sufferers to perform than others; try [swimming](#), biking, walking, rowing, and [yoga](#).

### *Other Treatment Modalities*

Surgical intervention, implanted devices, injections, and intravenous medications, alternative therapies (acupuncture, massage), meditation, biofeedback, yoga, chiropractic care, dietary changes, herbal remedies

### *Pain Clinics*

Pain clinics are special care centers devoted exclusively to dealing with intractable pain. Pain clinics generally employ a multidisciplinary approach, involving physicians, psychologists, and physical therapists. The patient as well should take an active role in his or her own

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treatment. The aim in many cases is not only to alleviate pain but also to teach the chronic sufferer how to come to terms with pain and function in spite of it.

*Mental Health*

The emotional toll of chronic pain also can make pain worse. [Anxiety](#), stress, [depression](#), anger, and [fatigue](#) interact in complex ways with chronic pain and may decrease the body's production of natural painkillers. Because of the mind-body links associated with chronic pain, effective treatment requires addressing psychological as well as physical aspects of the condition. In self-management programs, the individual patient becomes an active participant in his or her pain treatment—engaging in problem-solving, pacing, decision-making, and taking actions to manage their pain. Although self-management programs can differ, they have some common features. Their approach is that the person living with pain needs help learning to think, feel, and do better, despite the persistence of pain. Improving communication with the healthcare provider is part of that empowerment.

**Definition of Well-managed Chronic Pain**

Self-reported tolerance or ability to complete everyday tasks at acceptable level of comfort/pain.

No utilization of urgent or emergent health services or providers. Regular use of primary care provider, specialist, or pain clinic.

Consistent use and stable pattern of identified treatment regimen.

Supportive family, friends, and resources as needed for mental health and pain management.

**Resources**

[Pain: Hope Through Research](#) National Institute of Neurological Disorders and Stroke

[Definitions and Types of Pain](#) (Mount Sinai Beth Israel Division of Palliative Care)

[Pain](#) (National Library of Medicine – Medline Plus)

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Chronic Care Guideline Goal	“As evidenced by” (AEB) example	Suggested care plan education from Coach & Communicate
<b>Goal: Optimal management of chronic pain</b>	As evidenced by patient self-report of adequate pain control	<a href="#">Chronic Pain Syndrome</a>
	As evidenced by patient self-reporting understanding of how to manage pain using non-pharmacological treatment options.	<a href="#">Chronic Pain: Treatments other than Medicine</a>
	As evidenced by patient self-reporting understanding of how to manage pain using prescribed medications.	<a href="#">Chronic Pain: How Medications can help you manage it</a>
	As evidenced by patient self-reporting adherence to pain management plan [including appropriate utilization patterns].	
<b>Goal: Established Medical Home for ongoing patient care</b>	As evidenced by patient successfully following up with primary care provider.	
	As evidenced by patient successfully following up with pain specialist or pain clinic.	<a href="#">Pain Management Clinic</a>