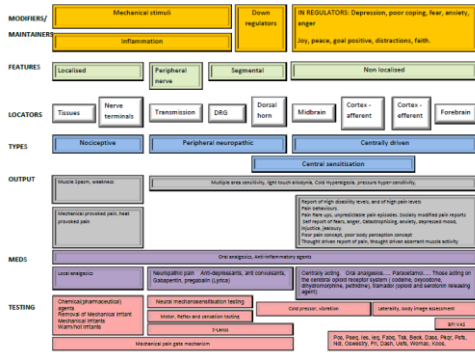


Pain assessment: Patient



Pain assessment: Practitioner

What is my Knowledge, beliefs, expectations culture, with respect of pain and disability
Do I have these independently assessed on a regular basis

How do I communicate/model/educate?
Is my culture and professionalism appropriate?
Does this fit with the patient?
Do I have a service delivery that will fit with this patient?

Will it benefit the patient if I proceed to assist in intervening?



Pain assessment: Summary

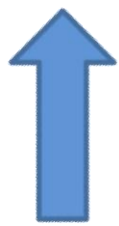
- What else do I need to know?
- What else do you need to know?

- What is the Patient's main concern? Pain/ Disability/other loss?
- How will the patient measure improvement?
- How will I measure improvement?

What is the shared truth?

- What were the predisposing factors to the onset?
- What is the cause of onset of the loss/pain/disability
- Where is the pain now generated? How has the loss, and the disability arisen?
- What are the maintaining factors for these items above?
- What will be likely to precipitate an exacerbation?
- What will be modifiers of the pain/loss/ disability?
 - Helpful factors/Hindrances to progress.

- Establish a problem list to deal with
- Establish patient preferences
- Establish action plan with goals



Pain Assessment: Environment

Review of physical environmental factors contributing to the development of the pain
Physical: The patient and the task

- Ergonomic
- Activities of daily living
- Self care activities
- Sport
- Hobbies

Temperature/Humidity/Dust/Noise/Light

Review of significant others contributing to the development of the pain
What personal influences are significant for the patient?

- Family beliefs: Family pain and disability history
- Workplace beliefs: Beliefs of workmates, employers
- Political/system belief
- Third party payers