



Your Recovery Workbook:

Managing Pain

YOUR RECOVERY WORKBOOK: MANAGING PAIN

Copyright 2015

Health Vista, Inc.
305 N 2nd Street
La Crescent, MN 55947
www.healthvista.net

All rights reserved

The information in this workbook is not to be used instead of talking to your health care provider. Your health concerns should be evaluated by a qualified professional.

Limited photocopies can be made by individuals who have purchased this workbook or those who have a purchased book that was given to them. This permission is limited to those pages that contain information the person wants to share with a health care provider. This does not grant the right to reproduce this workbook for any other reason without permission in writing by Health Vista, Inc.

Except as stated, no part of this book may be copied, translated, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, microfilming, recording, or otherwise, without written permission from the publisher.

Printed in the United States of America

CATALOGING-IN-PUBLICATION DATA

Knutson, Mary B.

Your Recovery Workbook: Managing Pain

ISBN: 978-0-9961693-0-1. Health — Self-help

Revised 12-26-15

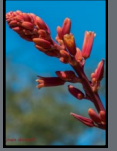
TABLE OF CONTENTS



1. Introduction	Page 2
2. Understand what pain is	Page 3
3. Describe your pain	Page 5
4. Use a pain scale	Page 7
5. Treat pain early and be self-aware	Page 9
6. Use a variety of treatments	Page 10
7. Recover safely	Page 12
8. Be realistic and pace yourself	Page 14
9. Use coping skills	Page 15

A Managing Pain Story: A young woman who had severe pain was planning to have back surgery. She told her doctor about some pain pills that caused side effects when she took them in the past. She didn't want to take them again. So, they planned together some other treatments she should use. She also chose to try some relaxation skills to help manage pain. After surgery, she knew there would be pain, and did not make it worse by worrying. She took a pain pill when she rated pain "4" or more. She took a pain pill just before doing physical therapy, and once during the night. She used essential oils, listened to music, and did deep breathing. Her activity goals were realistic and she followed a plan for exercise and rest. If the pain got worse, she was able to take an over-the-counter pain pill between doses of the stronger ones. She was glad she didn't need very many of the strong pain pills, and she slowly stopped taking pain medication as she recovered.

1. INTRODUCTION



- Pain is common after having surgery or injuries.
- It may even be expected with some medical treatments or illnesses.
- Having pain is not all bad—It can let you know what is happening in your body.
- Our goal is to help you prepare for and manage pain.
- We want you to be as comfortable as possible while your body rests, heals, and returns to your chosen activities.
- By working with your health care team, pain can be safely managed and you can feel better as soon as possible.
- An active role includes planning ahead for a healthy recovery, talking about your pain, and using a variety of treatments.
- Using coping skills along with other treatments can help keep anxiety and tension lower and help manage pain. For more information, download *Your Recovery Workbook: Coping and Relaxation* free from www.healthvista.net.
- With this workbook, you can learn more about pain, and use it as a guide for better pain management.
- Talk to your doctor or health care provider for any questions you have.

*“ ... PAIN IN THE HUMAN BODY [IS NECESSARY].
IT CALLS ATTENTION TO AN UNHEALTHY
STATE OF THINGS.”*

- WINSTON CHURCHILL

2. UNDERSTAND WHAT PAIN IS



What is pain? (*Mark the statements below that you agree with*)

- Pain is felt along a path that goes from your body's cells that receive pain signals and the nerve endings, all the way to the brain.
- Pain can be changed at every step along its pathway to the brain.
- Pain is an unpleasant and distressing experience that affects your senses and emotions.
- Pain is what you (the person who has pain) says it is.

Modified from Regnard, C. (2008). Helping the patient with pain: What is pain? Retrieved from <http://www.helptheospices.org.uk/clip/pdf/hpp-1.pdf>

What are some common reasons for pain? (*Mark the ones you may have had*)

Usually, pain is not from treatment that doesn't work – It can be from:

- Believing that your pain can't be managed
- Having the wrong diagnosis of the cause of pain
- Not understanding your medicines and how to use them
- Expecting an unrealistic amount of pain relief
- Not telling your health care team how much pain you are in
- Not being aware of your own needs, mood and morale

Adapted from Twycross (updated 1972) in Regnard, C. (2008). Helping the patient with pain: What is pain? Retrieved from <http://www.helptheospices.org.uk/clip/pdf/hpp-1.pdf>

**SOLID EVIDENCE NOW SHOWS THAT KNOWING WHY
WE HURT WILL HELP US HEAL.**

- FROM "EXPLAIN PAIN" BOOK, NEURO ORTHOPEDIC INSTITUTE

EXPRESS YOURSELF



Draw a picture, write a poem, or pen a story about your pain:

A large, empty rectangular box with a double-line border, intended for drawing, writing a poem, or penning a story about pain.

3. DESCRIBE YOUR PAIN



Copy or bring these worksheet pages to discuss your pain history with your health care team.

Together, you can plan the best way to treat your pain.

Has your pain lasted for 6 months or more? Yes _____ No _____

(If *yes*, you have chronic or long-term pain. If *no*, it is acute or short-term pain)

People can have both types of pain in more than one part of the body.

Chronic pain can be more challenging than acute, but both can be managed.

When did your pain start? _____

Was it from a surgery, injury illness or other? _____

What makes the pain feel better (heat, cold, medicine, rest, or other)?

What makes the pain worse (movement, walking, lifting, or other)?

What treatments or medicines are you using for pain?

Have you had any side effects from pain medicine (like hard bowel movements, foggy thinking, unsteady walking, or other)?

Discuss your goals and options as you prepare for a healthy recovery after painful treatments, surgeries, or procedures:

PUT PAIN INTO WORDS



Sometimes, it's hard to put pain into words, but describing your pain can give clues to how healthy or how ill you are.

Circle the words below that describe your pain:

Aching	Dull	Stabbing	Tender
Sore	Burning	Stinging	Itching
Numbing	Pins and needles	Pulling	Sharp
Cramping	Jabbing	Shooting	Electric
Pounding	Splitting	Gnawing	Nagging
Pressure	Tiring	Pricking	Cutting
Throbbing	Radiating	Squeezing	Piercing
Crushing	Pinching	Nauseating	Constant (steady)
Brief (quick pain)	Intermittent (comes and goes)	Rhythmic	Other ways to describe pain:

Modified from Melzack, R. (1983). The McGill pain questionnaire. Retrieved from http://www.fcesoftware.com/images/16_McGill_Pain_Questionnaire.pdf

Other: _____

Where on your body is the pain?

Does it move toward any other body part? If so, where?

People see pain and bear pain in their own way - It is unique to the person who has it. It is important to **find the words** to tell your health care providers what your pain feels like and how intense it is.

4. USE A PAIN SCALE



What is a pain scale?

Pain scales are used in your medical record to keep track of how intense your pain is – The use of pain scales is expected by agencies that oversee healthcare.

Your ratings are not compared to other people - Pain scales track changes in your own pain levels.

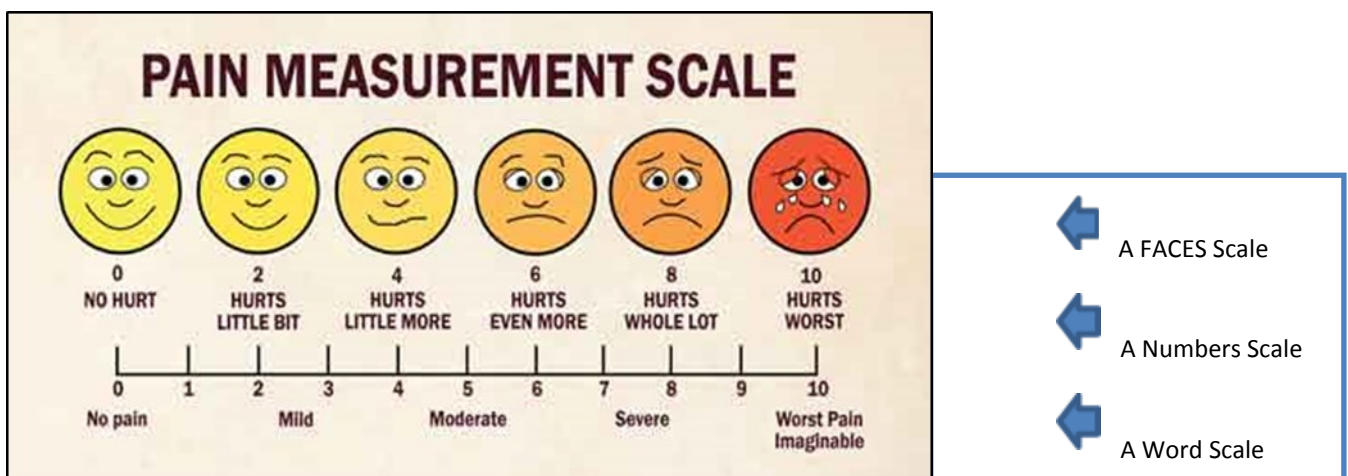
Pain scales are meant to help your care providers know how their efforts to manage your pain are working, or if they should try something else.

By telling your health care team about your pain and using a pain scale, treatment and comfort can be quicker and more effective.

The left side of the pain scale (the number 0 or the happy face) means no pain, and the right of the scale (the number 10 or the crying face) means the worst pain you can imagine.

You can say or point to a picture, a number, a word, or somewhere in between them.

Below are FACES, Number, or Word Scales - *Circle the pain scale you prefer:*



Pain scale retrieved from <http://www.crdamc.amedd.army.mil/surgery/child6.aspx>

PRACTICE AND PLAN



Write your current pain rating here _____

Pain rating at its worst _____ Pain rating at its best _____

What is your goal rating for pain control? _____

Sometimes having a goal of “no pain” is not realistic, for instance after you have surgery.

Besides your goal number for pain intensity, think of another goal—Something you want to be able to do if your pain control is good enough:

What are your goal activities?

Think about what happens when your pain is not treated. *Mark them below:*

- The pain goes away on its own if I go to sleep.
- It gets better if I find something to do.
- The pain gets worse, so I can't do the things I want to do.
- When it gets worse, I get very tense and anxious.
- The pain gets so bad that pain medications don't work very well.
- I feel sad and “stuck”.
- It seems like I have no control over anything.

Why is pain management important to you?

5. TREAT PAIN EARLY AND BE SELF-AWARE



Your health care team wants to know how you feel so helpful treatments can be given.

Tell them if you become more uncomfortable, or have trouble sleeping. (Sometimes it is hard for other people to tell if you are sleeping or not.)

If you wake up in pain during the night, it is a good idea to take a pain pill (if the doses aren't too close together). If you don't treat the pain until morning, it may be extreme, and harder to manage.

Don't wait for someone to ask you – Speak up for what you need.

It is a lot easier to control pain before it gets really bad. Avoid a “roller coaster” of ups and downs.

Consider how you could manage these pain examples and write your answers:

With the pain situations below, ask yourself these questions →	How does your body feel?	What emotions do you feel?	Does your pain need treatment?	Why or why not?
If your pain was severe and you rated it at 9				
If you were very sleepy and confused after taking pain medicine				
If your pain was rated at 4 after taking pain medicine				
If you woke up during the night with pain				
If you had pain before physical therapy				

6. USE A VARIETY OF TREATMENTS



There are many kinds of treatments that can be used for pain management—
Not just pain medications.

Pain medicine may be in pills, liquid, skin patches, intravenous (IV) through a small needle in a vein, suppositories (soft, waxy capsules in the rectum), skin creams, or ointments.

Mark the medicine you would like to use, if your provider OK's them. Let your health care provider know what you want.

- Narcotic medications (opioids) like morphine or oxycodone
 - In the hospital, it is common to use opioids for pain treatment.
 - The medicine binds to receptors in the brain, spinal cord, and other areas of the body, to reduce the sending of pain messages to the brain.
 - Some people abuse opioids. But, they can be used safely with low risk of addiction as part of a care team's treatment plan for managing pain.
- Analgesic medication
 - Tylenol (acetaminophen) is often used for pain
 - Non-steroidal anti-inflammatory drugs (NSAIDs) like Motrin, Aleve, or ibuprofen
 - Medicine that relaxes your muscles
 - Anti-anxiety drugs like benzodiazepines, Xanax, or Ativan
 - Antidepressants or anti-seizure drugs that may help treat nerve pain
 - Sedatives or sleep aids

What other treatments besides medication have you used for pain in the past?

TRY OTHER TREATMENTS FOR PAIN



Mark treatments you would like to use, if your provider OK's them. Let your health care provider know what you want.

- Cold or warm treatment
- Changing positions or using pillows for support
- Relaxation skills like deep breathing, guided imagery, or muscle relaxation
- Music or creative arts
- Massage (if available)
- Yoga or gentle stretching
- Essential oils
- Acupuncture (if available)
- Chiropractic care
- Nerve stimulators
- Physical therapy
- Consulting a pain specialist
- Other _____

“THINK OF PAIN LIKE A WALL. INSTEAD OF A BRICK WALL THAT IS NOT FLEXIBLE, THINK OF A WALL OF WATER. RIDE IT LIKE A SURFER, MAKING MANY SMALL ADJUSTMENTS. ALLOW FOR SETBACKS.”

- MARY ATWATER

ACCEPTANCE OF CHRONIC PAIN: OUR DIS EASE WITH PAIN PRESENTATION (2012) AT ACBS CONFERENCE.

7. RECOVER SAFELY



- Be as active as possible (for example, being up in a chair or walking) within the limits given to you by your health care team.
- **By treating pain, people can move better, be more active, start to heal, and get better sleep.**
- When pain medicine is used in the right way, people rarely become addicted. Pain management helps your recovery. If your care team didn't want you to use pain pills, they wouldn't be given to you.
- By using a variety of pain medicine and treatments, the risk of addiction is lower with fewer side effects.
- **Ask about or read about the medications you are taking**

The most common problems while taking opioids are:

- Constipation – Usually treated with stool softeners such as docusate sodium (Colace) and a gentle laxative such as senna (Senokot) – Or, you may need something stronger.
- Nausea and vomiting – Usually lasts only a few days. Other medicine can be added to help prevent nausea.
- Feeling sleepy – Usually lasts a short time when first starting opioids.

Which side effects do you worry about?

What concerns do you have about using pain medications or treatments?

Discuss with your health care provider your plan for a healthy recovery.

TAKE MEDICINE SAFELY



Treating pain can be the key to doing activities that are important to you. But, **be careful** and understand what your health care provider wants you to do. Medicines that may seem harmless can sometimes be harmful.

- Limit the amount of acetaminophen (Tylenol) you take – Taking too much can damage your liver.
- Don't take pills over-the-counter (OTC) along with your prescribed pain medicine without checking with your health care provider first – There is a safe daily dose limit to be aware of (OTC pills may contain acetaminophen or other medicine that could cause problems).
- Use only the amount of pain medicine that is prescribed for you – Taking extra doses is harmful and can cause more side effects.
- Don't stop taking opioids suddenly, or you may have withdrawal symptoms. Your body can get used to them, even though you aren't addicted.
- **Do not drink alcohol if you are using pain medication.**

How do you know how to take your medication safely? _____

How important do you think treating pain is to your recovery? Why?

**ACCEPT NEW LIMITS YOU MAY HAVE
- BE KIND TO YOURSELF AND TO YOUR BODY.
FIND NEW OPTIONS AS YOU WORK TOWARD
LIVING WELL.**

8. BE REALISTIC AND PACE YOURSELF



- Even with strong pain medicine and other treatments, you may still have some pain. However, **your pain can be managed.**
- Pain relief may not happen as quickly as you want - Try to be patient when your pain medication or treatment takes some time to be effective.
- When you are tense or anxious, pain usually takes longer to get better.

Pace yourself - Your body needs some movement, but don't over-do it.

- Know your limits - Ask your health care provider if there is anything that would cause injury or damage.
- Some things that cause pain may improve your health, like physical therapy.
- You need to be ready to try more activities, and know if you are doing too much.
- James L. Smith, a physical therapist, teaches pacing activities using the “20 Minute Rule”. You **can** do activities or exercise that may cause some mild or moderate pain, but generally do not push into strong pain unless your care provider recommends this.
 - If your pain goes back to baseline (as it was before the activity) within 20-30 minutes, those activities will not cause harm. They may be helpful by telling your tissues how to heal.
 - If pain after exercise or activity increases and lasts for more than 20-30 minutes after you are done, it may mean you are overdoing it. You should cut back a bit or talk to your therapist or provider. Avoid doing things that you were told to avoid.
- **Find a proper balance of activity, rest, and good nutrition.** *Make a plan for managing pain and increasing your activity.*

9. USE COPING SKILLS



Don't rely on only medicine for pain and anxiety - Relaxation and coping skills can add to your health care "toolbox" and help you feel more in control.

What coping skills do you already know and use?

Mark below the ones you have used and circle or highlight those you want to try.

- Break up tasks into smaller chunks you can manage – Find the simplest way.
- Pace yourself by slowly increasing activity and fitness.
- Be aware of tense muscles, and use relaxation skills to loosen them.
- Use the most helpful posture and body position.
- Be as active as possible, even when you are sore. Change the way you do things if needed.
- Rank activities that are important to you - Keep enough time and energy for those things (even if you let other things go).
- Set goals – Consider what it would take to work toward those goals.
- Distract yourself by thinking of something pleasant, interesting, or different.
- Take time to gain new awareness by listening and self-reflection.
- Sort out the situation so you can start problem solving.
- Express your needs – Get help from others if you need to.
- Recognize negative thinking and try to change your attitude to something more positive. Ask yourself if your negative thoughts are realistic.
- Tell yourself. "I can get through this." and keep going. Use positive self-talk:
 - "Stop and breathe. I can do this. I will just take things slowly."
 - "This feels bad, but it is a normal body reaction – It will pass."

TRY NEW WAYS OF COPING



- Think about here and now, rather than past or possible future problems.
 - “I’m scared, but I am safe here - My health care team is here to help.”
 - “My negative thoughts are just thoughts - they are not facts.”
- Use deep breathing to jump-start your body toward relaxing.

Modified from Healthskills (2008). Retrieved from <http://healthskills.wordpress.com/2008/10/13/pain-management-strategy-worksheet-and-activity/>

- Use music, videos, or other recordings to guide your relaxation.
- You can purchase music or find some free of charge on YouTube. Search under muscle relaxation, Yiruma, or relax – Zen garden
- Make a list of things that help you feel better and think about them when you feel uncomfortable:
 - People and pets who make you smile
 - Places that bring a smile to your face
 - Things that make you happy
 - Things you like to do

Pain is a very common, but serious problem.

Pain affects both the body and mind. Managing it can greatly improve your quality of life.

Tell someone on your health care team when you are having pain – **You don’t have to manage pain alone.**

Try some of the treatment options and coping skills in this workbook for a safer and more comfortable recovery.

FOCUS ON COPING



Draw a picture, write a poem, or pen a story about your coping:

A large, empty rectangular box with a double-line border, intended for drawing, writing a poem, or penning a story about coping.



ABOUT THE AUTHOR

Mary B. Knutson is a Registered Nurse with a Master's Degree as a Nurse Educator. She has worked to improve education resources in academic settings, research, long-term care facilities, hospitals (including psychiatric units), and community health care agencies with the goal of empowering people and helping them toward better self-care. A collection of health education resources can be found online at www.healthvista.net.

Visit healthvista.net for more recovery resources.

Cover photo and other
photos by Joan Doucet
from Surprise, AZ

Health Vista, Inc.
305 N 2nd Street
La Crescent, MN 55947

ISBN-13: 978-0-9961693-0-1