



***2004 Perspectives on Pain Management  
in the Emergency Department***

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## ***2004 Perspectives on Pain Management in the ED***

### **Key Learning Points**

- Because the vast majority of patients present to the Emergency Department for management of painful conditions, and because of recent JCAHO initiatives, emergency physicians continue to have a critical role in the overall scope of patient pain management.
- Emergency physicians utilize a basic set of principles, therapeutic agents, and guidelines in the management of ED patients who require pain management.
- In general, emergency physicians attempt to reduce pain levels through the use of oral acetaminophen, NSAIDs, and combination narcotic preparations, as well as parenteral ketarolac, morphine, and anti-emetics.
- Emergency physicians willingly adopt new practice patterns that utilize methods and therapeutic agents that are proven to be safe and effective, are easily understood, and can be provided to a large number of undifferentiated patient populations, including those who are experiencing pain.
- Pain management in the ED can be enhanced through the development of systematic means of assessing patient pain, rapidly utilizing available therapeutics, and consistently evaluating the effectiveness of the interventions in relieving patient pain.

### **Clinical Questions**

- Do emergency physicians consistently provide quality pain management to patients who present to the ED with painful conditions?
- What guidelines govern emergency physicians' management of ED patients with pain, and how can these guidelines be enhanced and broadly applied?
- Is it optimal that emergency physicians practice with a basic set of therapeutic agents for pain management, or should the range of therapies be expanded?
- Are there other therapies that are being utilized by other general practitioners or specialists that should be used by Emergency physicians when managing ED patients with painful conditions?
- Are there verified systems that already exist that could be easily implemented in the ED in order to enhance the effectiveness of acute ED pain management?

## **Emergency Medicine Opportunities**

- Academic emergency physicians and Emergency Medicine organizations should actively explore through quality research the way in which acute pain management can be optimally delivered, including the identification of any disparities that might exist based on ED patient demographics or practice settings.
- The American College of Emergency Physicians could augment its policy statement on ED pain management through the development of a clinical policy, and academic emergency physicians could educate both residents in training and practicing emergency physicians into the use of these guidelines.
- Emergency physicians should evaluate the quality of the currently utilized therapeutics and modalities for the management of ED patients who are experiencing pain.
- Emergency physicians should seek out the adoption of new pain therapeutics and modalities so that ED patients who experience pain can be optimally treated.
- Emergency physicians should become uniformly competent at the following aspects of ED patient pain management:
  - Providing a rapid initial assessment of patient pain and the conditions that are causing the pain.
  - Developing a systematic way in which patient pain can be alleviated prior to and during the provision of necessary diagnostic procedures.
  - Having a thorough understanding of the relevant clinical features of therapeutics and modalities that are currently available to treat ED patient pain.
  - Being able to learn about new pain therapeutics as they become available.
  - Consistently documenting the effectiveness of the therapies that are provided in order to alleviate ED patient pain.

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