EMR Quick Reference Guide

Chest Pain Observations

1. Document observations as normal in the **Observation Chart** and document any relevant additional comments.

2. Document **Pain Assessment**:
    o   Go to the table of contents, select **Interactive View and Fluid Balance**.
    o   Select **Adult Systems Assessmen**t and then **Pain Assessment**.

3. Enter the following fields in the **Pain Assessment**:
    o   Conscious state
    o   Sedation Score
    o   Pain Present
    o   If pain present, complete conditional logic and use the Numeric Pain Assessment.
    o   Description of Pain – Location, Type, Time

	16:27	15:55
⊿ Pain Assessment		
Conscious State		Alert
Sedation Score (Adult)		0 = Wide awake
Pain Present		Yes actual or suspected pain
Pre-existing Pain Condition		Yes
Pain Assessment		Numeric rating scale
Numeric Pain Score at Rest		10
Numeric Pain Score with Activity		10
FACES Pain Scale at Rest		
FACES Pain Scale with Activity		
Primary Pain Location		Chest
Primary Pain Laterality		Bilateral
Primary Pain Type		Dull, Heavy, Radiating, Tight...
Primary Pain Time Pattern		Constant
Secondary Pain		
Tertiary Pain		
Quaternary Pain		
Non-pharmacological Therapy		
⊿ Pain Interventions		
Pharmacological Therapy		Offered, Administered
Non-pharmacological Therapy		

4. Document medications administered for pain on the **MAR**.

5. If additional information is required for any of the above fields, enter comments into the **Nursing Shift Notes.**

Western Health