# Improving patient comfort in time of distress: Management of pain in the pre-hospital setting

PROBLEM: Although not a cure to a medical emergency, relief from pain should be seen as a right, however it has too TEAM: often not been given to patients in the pre-hospital care domain in Qatar.

AIM: Ensure all patients with a pain threshold of 5 or more over 10 are provided with appropriate analgesia by prehospital care providers

### **INTERVENTION:**

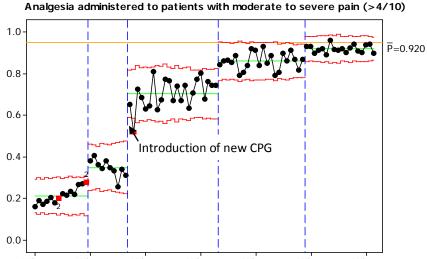
- Introduction of new Clinical Practice Guidelines (CPG) accompanied by a new training programme for our staff.

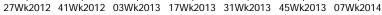
- Introduction of new analgesic drugs for Ambulance Paramedics and Critical care Paramedics.
- Use of a pain scale with pictures (removing language barrier) (Figure 1).
- Audits by Oscar supervisors to enforce pain scoring during Patient assessment.

- Reports of analgesia administration to patients with moderate to severe pain displayed in ambulance stations.

#### **RESULTS:**

Data from patient care record forms is monitored and analysed daily by the Quality Department. The graph below shows how the administration of pain relief therapy has changed over time when the patients' reported pain level reached our pre-determined threshold of 5 or more over 10.





Antoinine Service	CPG 1	CPG 6.1	CPG 6.1
	Anderson of Device Canadi Name And Andrewson	CPG 6.1: Management of Pain	Assessment of D
	Orgoing Management	The Management Am Development as a sense of the second	17 JR Symptons, pur La environmental procesa
	<ul> <li>Epochy Department (an pro-Dona &amp; Gallerine)</li> <li>Strain and Antonia</li> <li>Ecologies active strain sets a statement for updated presentation</li> </ul>	<ul> <li>a de construir de construir e la presentação de construir de la construir.</li> <li>a de construir de construir de la construir de construi</li></ul>	Rate scaling The following administra 1 - Nation
	A. Sengert to generate SONy     Canone the temptor's two to induced with (17-(0) or wearing to project)	EducationAdage	1 Swety 1 Decem
Ambulance Service Cardical Practice Guidelines	NA KATATA MATANI (JANGA, PREDMINICAN VINA, MAN/PRA/LINE INDIANA/ MATANAKA MITUMOMRAF	And a creater of the instructionit spreamed presenting to the memories or calls. The new self is dynamic and websited appendix their the present of present spreamed is and presenting instrument and the other at long point of present and the comparison of the self-section and and before dealerment. These is in some in a string period.	<ol> <li>Sandy Print</li> <li>Nandy Print</li> </ol>
	INCOME VARIA ADMINISTRY ADMINISTRY AND INCOME REPORT OF A DAMAGE ONLY TO BE ADMINISTRY.	Ege van van in de Brann Amerik 1. September 4 de anteres entre 1. September 2 de anteres entres en	- Appendix Technical Entropy of
	THE CLARCEL APPEARCH IS TO REAMARD TO ALL AUTORITIES A MARKAN (ML DE CARL THE CART RECEPTORE THE RESEARCH AND A REMEMBER OF THE THEORY (ML DE CARL CART RECEPTORE THE PRANAFE DATES AND A RECEPTORE RECEPTOR ADDRESS OF A CONTROL CART RECEPTORE THE PRANAFE DATES AND A RECEPTORE RECEPTORE RESEARCH AND A RECEPTORE	Appendie van der bestellen gestellen von der bestellen     Appendie van der bestellen	Supress Supress Supress Supress
		Casto initiane engli permitane de las pare     Casto initiane	VMC Roly GARD'S I
	the set of	Security from examplements     Kalana entering	<ul> <li>Karsing to an anispe can be</li> </ul>

Figure 3-6: Extracts from the Management of Pain CPG.

## CONCLUSIONS:

The use of analgesia for patients who reported experiencing moderate to severe pain has significantly improved in the last 18 months. Staff have gained confidence in the administration of new drugs that were previously outside of their scope of practice.

- Analgesia administration is one of the elements that will remain permanently audited by the Quality Department.

- Other initiatives guided by current best evidence-based practice which will improve patient care are being implemented in a similar manner.

- Monitoring is key to measuring performance improvement in patient care.



#### Mr Philip de Bruyn Mr Mohamed Chaker Khenissi Dr Loua Al Shaikh Adult pain scoring can be done using the visual analogue scale or the numeric rating scale Mr James Bowen Mr Mohamed Hardan All HMCAS Clinical Officers All HMCAS Operation Officers **PROJECT SPONSOR:** Mr Brendon Morris 0 10 20 30 40 50 60 70 80 90 100 Figure 1: Visual pain scale used with patients. COACH:

Dr Loua Al Shaikh

Mr Brendon Morris