



Objectives: Chronic Pain

1. In a patient with chronic pain:
 - a. Establish the etiology
 - b. Reassess and periodically review the etiology (e.g. previously undisclosed abuse, evolution of the underlying cause).
 - c. Periodically look for potential comorbidities or complications, particularly mental illness and addictions.
2. In a patient with chronic pain who complains of significantly increased pain, search for an alternative etiology (e.g. malignancy, addiction, diversion) as you cannot assume that the original cause of the pain is the reason for the exacerbation.
3. In a patient in whom you did not make the initial diagnosis of chronic pain:
 - a. Establish an effective relationship
 - b. Verify the diagnosis
 - c. Clarify the goals of treatment and plans for management
4. In managing a patient with chronic pain:
 - a. Use shared decision making
 - b. Engage other professionals in this care when appropriate
5. In a patient with chronic pain,
 - a. Comprehensively document the assessment, plan, goals and prescriptions.
 - b. Make the treatment plan appropriately accessible (e.g. to the patient, team members, emergency department, on-call doctors, pharmacy).
6. When prescribing medications with abuse potential in a patient with chronic pain where you have no established relationship or insufficient records, be prudent in your prescribing (e.g. limit doses, check for double doctoring). Do not simply prescribe or refuse to prescribe.
7. In patients with chronic pain being treated with opioids, routinely and without discrimination, conduct urine drug screening to confirm appropriate use.
8. Use written treatment contracts with realistic consequences (e.g. limiting prescribed quantities/carries) when prescribing medications with abuse potential.
9. When a patient with chronic pain has breached a contract:
 - a. Manage your emotions
 - b. Address the possible impact on your staff and team
 - c. Apply or judiciously amend the contract (e.g. not putting a patient into immediate withdrawal).
10. In a patient with chronic pain and addiction who presents with destabilization of behaviour, carefully identify the etiology and contributing factors to adapt your management plan.

** Mapped to the CFPC's 105 priority topics: #14-Chronic Disease