Chronic Pain Management Algorithm

Presbyterian Health Plan, Inc. Presbyterian Insurance Company, Inc.

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The chronic primary pain¹ management alrogithm is intended to help providers guide patients with chronic pain to adequate care that is appropriate and cost-effective. Please see the phases below to evaluate chronic pain, develop a care plan and evaluate effectiveness of treatment.

Phase 1: Assessment with a Biopsychosocial Perspective

Biological Factors

- Pain generator
- Precise diagnosis
- Age
- Injury and past injury
- Illnesses
- Neurological factors
- Genetics and family history
- Hormones
- Obesity

Work

Exercise

Daily activities

Family interaction

Neuropathic

Neuropathies (diabetes,

post herpetic, trigeminal)

Nerve root compression

Injections (epidural, facet)

Neuropathic pharmacologic

Conditions

Treatment

Sciatica

Options

Surgery

agents

Topical agents

- **Psychological** Factors
- Behavioral health
- Mood/affect
- Stress
- Coping style and tools
- Trauma history
- Childhood factors
- Substance use

Social **Factors**

- Cultural
- Economic
- Social supports
- Spirituality
- Ethnicity
- Education
 - Stigma
- Assessment Daily activities
 - Work
 - Exercise

Self-Management

Shared decision making

Mindfulness exercises

Exercise, yoga and Tai Chi

and Education

Patient education

Pain

Physical

Neurological

Functional

Assessment Brief Pain Inventory

Spine/musculoskeletal

Phase 2: Plan of Care with Universal and Specific Recommendations

Identify **Functional Goals**

Initial Treatment **Options**

- Non-pharmacologic (physical therapy, behavioral therapy, sleep)
- Intervention (correctible causes, surgical)
- Pharmacologic (NSAIDs, etc.), considering previous therapeutic classes tried and failed (ineffective, side effects, etc.) to guide treatment

Musculoskeletal and **Mechanical Conditions**

- Osteoarthritis
- Myofascial
- Degenerative disk disease
- Other neck/back pain
- Injuries

Treatment 9 **Options**

- Acupuncture
- Chiropractic
- Massage
- Trigger point injections
- Topical agents
- NSAIDs
- Acetaminophen

arthropathy (rheumatoid

Treatment 0 Options

- Heat and cold
- Joint injections
- **NSAIDs**
- Corticosteroids
- Acetaminophen
- **Topical Agents**
- Immune modulating agents

Multiple Etiologies

- Headache
- Central pain syndromes (post-stroke, complex regional pain syndrome)
- Fibromyalgia
- **Behavioral**

Treatment **Options**

- Address insomnia
- Exercise
- Physical therapy
- Cognitive behavioral therapy
- Mindfulness

Phase 3: Periodic Evaluations



Pain Goals Met

Continue current plan of care Periodically re-evaluate needs and adjust plan of care



Pain Goals Not Met

- Reassess
- Adjust plan of care (e.g., to include opioid trial)
 - Refer to pain specialist

¹American Medical Association (AMA) definition of chronic primary pain: Three months of persistent pain in one or more anatomical regions that is unexplainable by another pain condition.

Inflammatory

arthritis)

Inflamatory Conditions