



Ensuring Proper Documentation of Persistent Pain and Breakthrough Pain (BTP)

	Intensity	Variation	Duration	Location	Description	Quality of Life
Persistent Pain	Using the persistent pain scale, ask: "On a scale of 0 to 10 (with 10 being the worst pain imaginable) please rate your persistent pain."	"Does your persistent pain vary throughout the day?"	"Does your pain last all day?" "If not, how long?" "When does it usually occur?"	"Point to where on your body the pain occurs?" "Is it on the surface or deep inside?"	"Which of these words best describes your pain?" "Aching" "Dull" "Numbness" "Sharp" "Shooting" "Tingling"	"Tell me how this pain affects ...your daily life." ...your favorite activities." ...your mood." ...relationship with spouse or family."
Break-through Pain (BTP)	Using the BTP scale, ask: "Do you experience flare-ups of BTP throughout the day?" "Please indicate on a scale of 0 to 10 (with 10 being the worst pain imaginable) ... the intensity of a TYPICAL episode of BTP:" ...the intensity of your WORST episode of BTP:"	Onset "How quickly does your BTP strike?"	"How long does ...a TYPICAL flare of BTP last?" ...your WORST flares of BTP last?"	"Does it move from one location to another?"		

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