

The Board for Professional Medical Conduct

The New York State Board for Professional Medical Conduct consists of physicians and non-physicians and is responsible for investigating and adjudicating complaints against physicians, physician assistants, medical residents and specialist assistants. For more information about the Board or the Office of Professional Medical Conduct, please contact us at:

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State of New York
Eliot Spitzer, Governor

Department of Health
Richard F. Daines, M.D., Commissioner

New York's Medical Conduct Program

Pain Management

A Guide for Patients

Introduction

As a patient it is your right to have your pain addressed by your health care provider.

Pain has many consequences for the individual sufferer, as well as society as a whole, and is a public health concern. Pain severely impacts the quality of life for the pain sufferer, their family and their community. Business and industry incur significant losses due to employee absenteeism, reduced productivity and increased health care costs.

There are three general categories of pain. There is acute (short-term) pain, such as that associated with accidents and surgery; chronic (long-term) pain, due to cancer, AIDS or terminal illness; and chronic pain, due to long-term conditions that are not terminal, such as back pain or headaches.

The management of any type of pain needs to be individualized, and is best done in consultation with one's health care provider. The information presented in this brochure is designed to help you work with your health care provider in obtaining the best management of your pain as possible.

You Should Know

1. As part of good medical care you should expect to receive appropriate assessment and management of pain.
2. Pain is managed best when treated early and continuously.
3. Controlled substances, such as narcotics, when used as prescribed, often have a role in effective pain management.
4. In the treatment of pain, true addiction is uncommon. You should not be reluctant to seek pain relief because of the fear of addiction. (Addiction is the compulsive use of controlled substances for non-legitimate purposes and is associated with loss of control and use despite harm.)
5. Medication side effects usually can be controlled and/or resolved over time.
6. Reduction or loss of a drug's effectiveness is not a reason to avoid taking pain medication. If you feel your medication is no longer working, treatment regimens can be modified.
7. Medication is not the only way to treat pain. Other therapies, used alone or in addition to medication, are often effective in treating pain.
8. Not every provider is equipped to deal with all types of pain. Talk with your provider about other specialists and treatment options.
9. Pain relief may not be immediate.
10. Not all pain can be completely relieved.

Communicate With Your Health Care Provider

Only you know how you feel – talk to your provider!

- Describe where you feel pain – be specific.
- Describe your pain (e.g., sharp, dull, burning, throbbing, steady, intermittent).
- Describe how severe your pain is (rate it 1 out of 10, with 10 being the worst pain imaginable).
- Describe how often you have pain (e.g., daily, nightly, weekly).
- Describe the impact your pain has on your daily activities (e.g., work, sleep, appetite, personal relationships, hobbies).
- Describe what you have tried to relieve your pain (e.g., over-the-counter medications, traditional and non-traditional therapies).
- Describe your reactions to pain control therapies to date.

Treating your pain is a partnership between you and your health care provider. Ongoing follow-up and communication are essential parts of this partnership. When the patient is a child, this partnership requires special cooperation between the child, the parents and the provider.