Acute sickle pain nurse activity flowsheet

Home triage

(by phone or video call)

Evaluation of acute event with SCD-specific algorithm
Action

- Phone advice
- Community team/GP visit
- ED attendance via ambulance/own transport

- Check pain protocol
- Inform ED

ED care

- Identification and confirmation of personal pain management plan on EPR
- Signposting of patient through ED
- Facilitation of first analgesia given within 30 minutes of arrival
- Supervision of analgesia protocol
  - scheduled analgesia doses
  - monitoring of pain score
  - monitoring for opioid toxicity and other complications of SCD via vital signs and clinical assessment
- Complementary therapies, eg CBT, relaxation, massage, virtual reality
- Psychological support
- Tailored support for frequent attenders/complex pain

Disposition

Discharge home:
Confirm OP analgesia prescription
Confirm follow-up arrangements
Referrals

Admission:

- Accompany patient to ward
- Handover to ward staff
- Continue daily visits to support patient and staff

EPR: Electronic patient record
ED: Emergency Department
CBT: Cognitive Behavioral Therapy
OP: Out patient