

**PAIN CLINICIAN  
AND WOCN**

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**Pain Pathways and Related Wound Pain**

- Nociception
  - Nociceptive pain is the normal physiological response to a painful stimulus and serves as a biologic function to warn of injury.
- Neuropathic
  - Neuropathic pain is caused by dysfunction or damage in the nervous system.
  - This is an inappropriate response wherein damaged nerves cause signals to travel in abnormal pathways.
- Anticipatory pain

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**Timing of Pain Medications**

- IV opioids
  - Onset 5min duration 20-30min
- Oral opioids
  - Immediate release
    - Onset 30-60min
    - Duration 2-4hrs
  - Long acting
    - Onset 2 hours
    - Duration 8 to 24hr

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**Case**  
**Conversion to Oral/IV opioids for Wound Vac**

- PC is 50 year old with large abdominal wound vac
- Currently receiving conscious sedation for wound vac changes
- Conversion to oral opioids
- Anticipatory pain

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**Topical agents**

- Lidocaine - bupivacaine
  - Infusion pumps into wound
  - Topical lidocaine for wound dressing
- NSAID Topical
- Opioid topical

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**Ketamine**

- How does this drug work and what are its side effects
- Use for opioid sparing effect
- Case
  - Trauma - motor cycle accident
  - 75% body "road rash"
  - Pain consistently 10/10 - physically tremoring, unable eat
  - Ketamine infusion 15min
  - Pain 0/10

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## Non Pharmaceutical

- Virtual reality
- Child Life – Pediatrics – distraction
- Music
- Video games

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## Ostomy /Ileostomy Long acting medications

- Appropriateness for use
  - *Should we use long acting pain medications?*
  - *Why – why not*
  - *Recommendations to convert to short acting - when ??*

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## Questions



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