



## **Clinical Best Practice Guidelines for Common Pain Conditions**

### **DESCRIPTION**

All physicians should become knowledgeable about assessing patients' pain and effective methods of pain treatment. This document provides evidence-based clinical best practice guidelines for management of common pain conditions.

Pain should be assessed and its cause diagnosed as clearly as possible using history and physical examination and appropriate testing. The medical management of pain should consider current clinical knowledge and medical research and the use of pharmacologic and non-pharmacologic modalities according to the judgment of the Provider. Pain should be promptly treated with non-pharmacologic therapy and non-opioid pharmacologic therapy, without acceptable results before opioids are considered.

Long-term opioid use often begins with treatment of acute pain. When opioids are used for acute pain, clinicians should prescribe the lowest effective dose of immediate-release/short-acting opioids and should prescribe no greater quantity than needed for the expected duration of pain severe enough to require opioids. Three days or less will often be sufficient; more than 7 days will rarely be needed. In addition, opioids are not the first-line therapy for chronic pain outside of active cancer treatment, palliative care, and end-of-life care. Evidence suggests that non-opioid treatments, including non-opioid medications and non-pharmacological therapies can provide relief to those suffering from chronic pain, and are safer.

Evidence-based clinical decision support is provided for the following **acute** pain conditions:

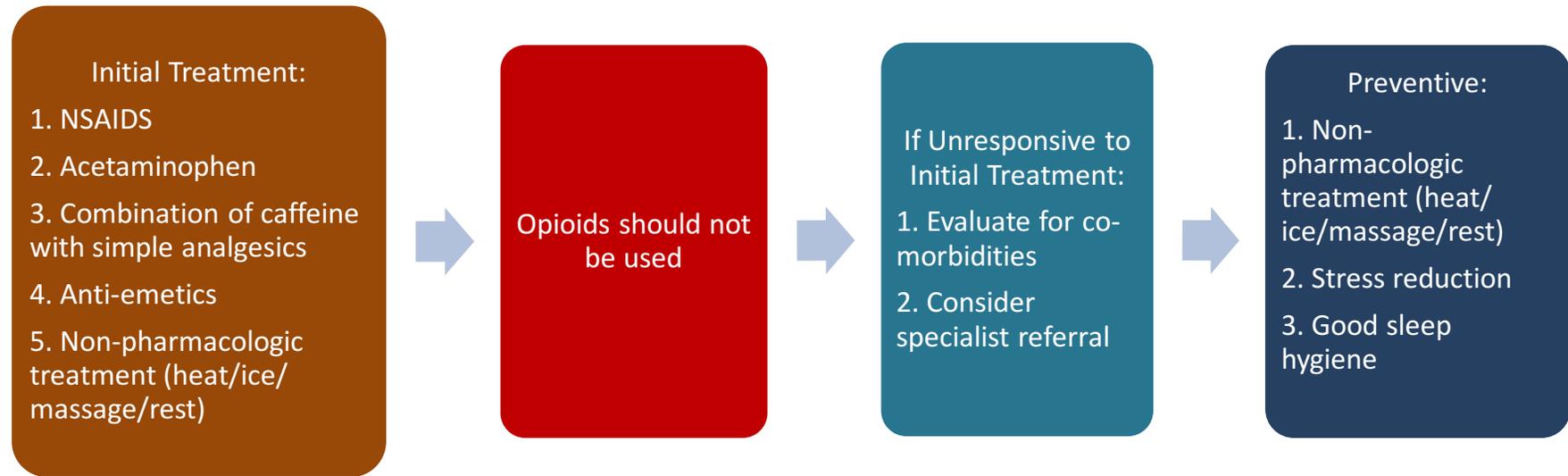
1. Headache
2. Back/Neck Pain Due to Strain or Sprain (Non-Radicular)
3. Mild-to-Moderate Radicular Back/Neck Pain
4. Severe Radicular Back/Neck Pain

Evidence-based clinical decision support is provided for the following **chronic** pain conditions:

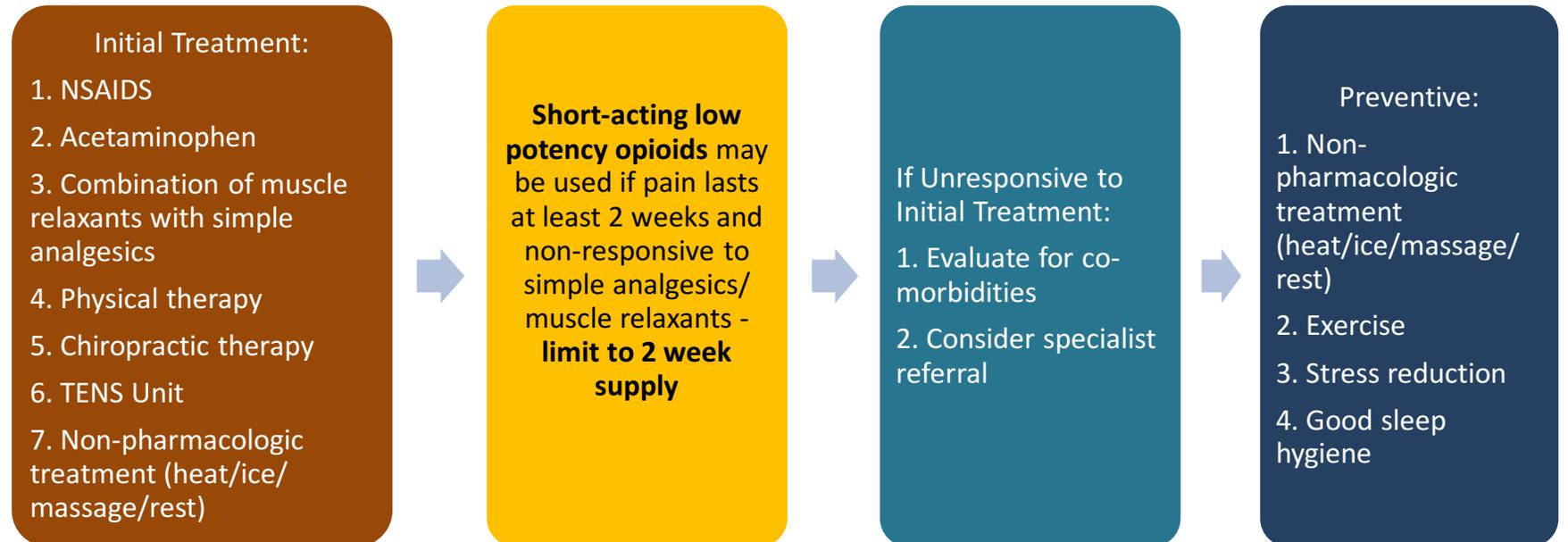
1. Migraine (Vascular Headaches)
2. Osteoarthritis
3. Fibromyalgia
4. Carpel Tunnel Syndrome (Neuropathic Pain)

## CLINICAL BEST PRACTICE GUIDELINES FOR COMMON ACUTE PAIN CONDITIONS

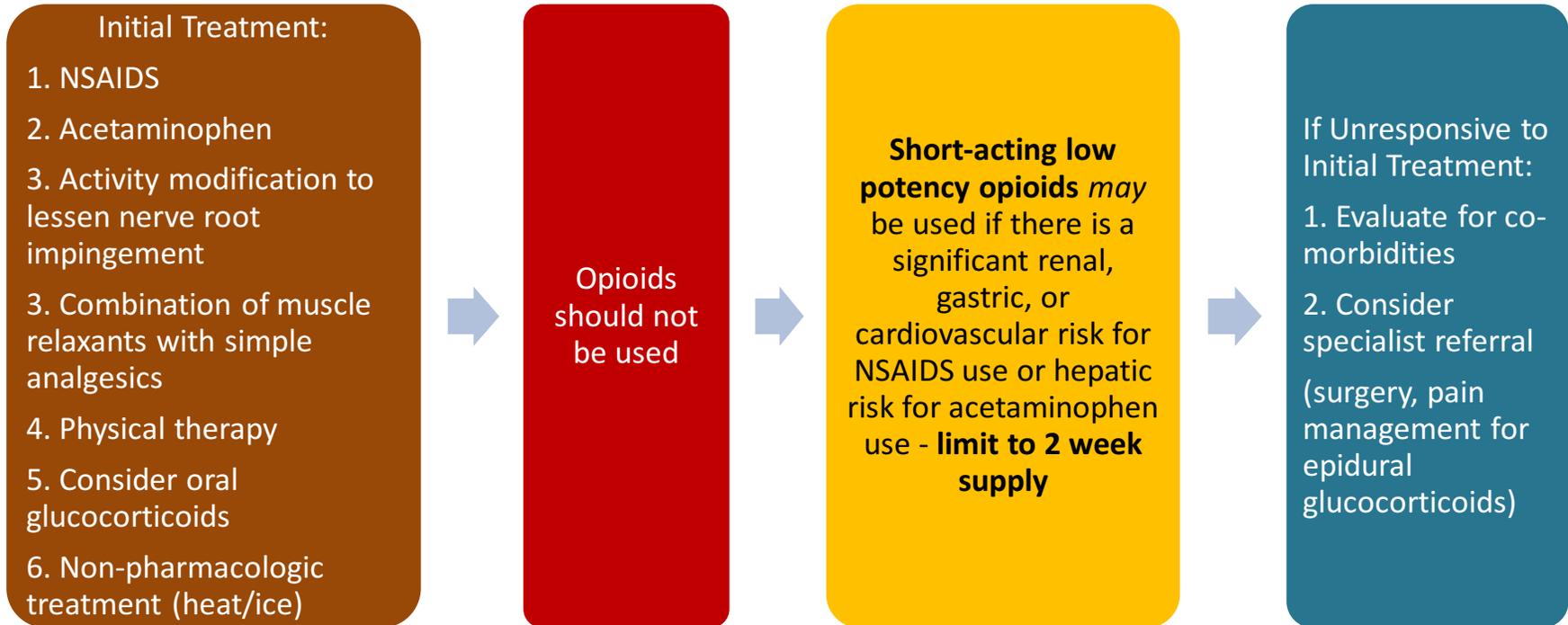
### Headache



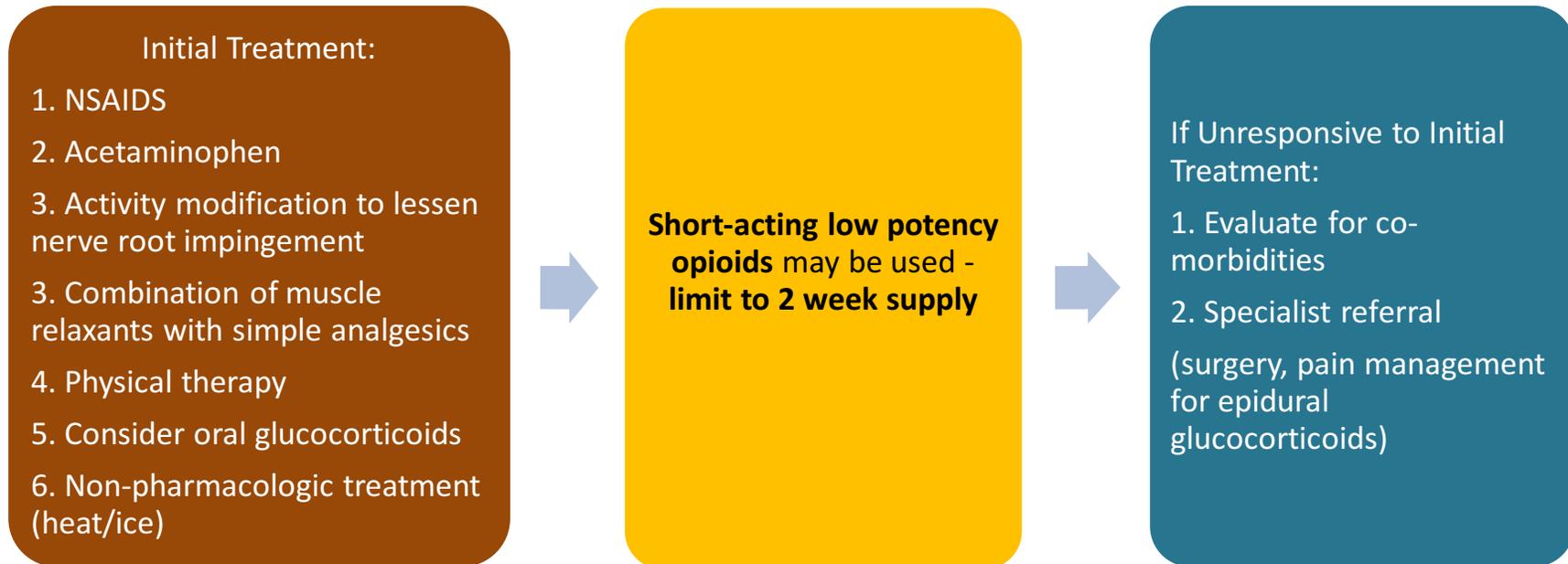
### Back/Neck Pain Due to Strain or Sprain (Non-Radicular)



**Mild-to-Moderate Radicular Back/Neck Pain (Pain Rating of 1-6/10 on Universal Pain Assessment Tool)**

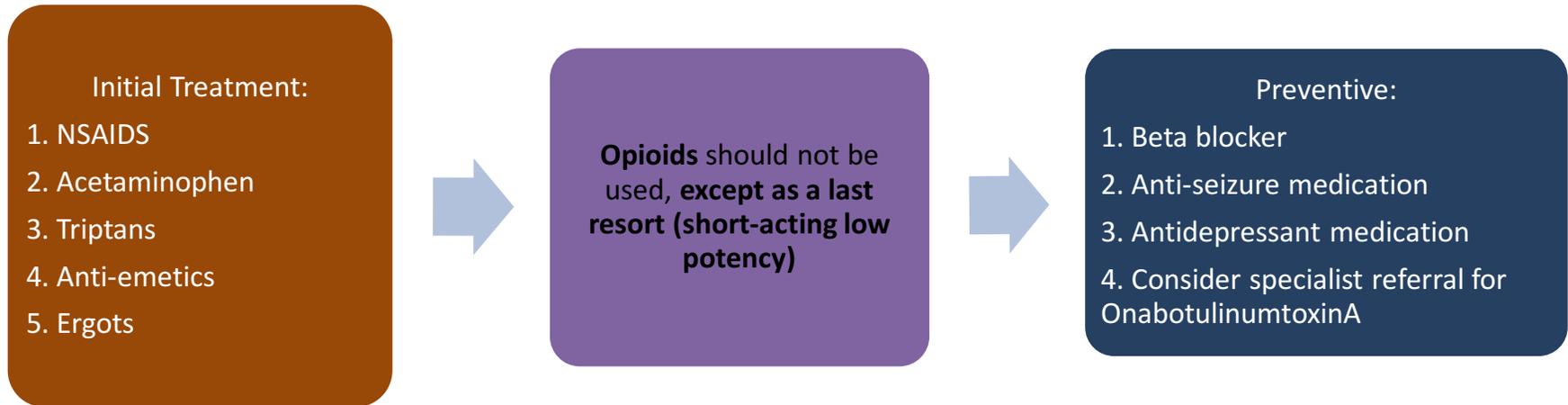


## Severe Radicular Back/Neck Pain (Pain Rating of 7-10/10 on Universal Pain Assessment Tool))

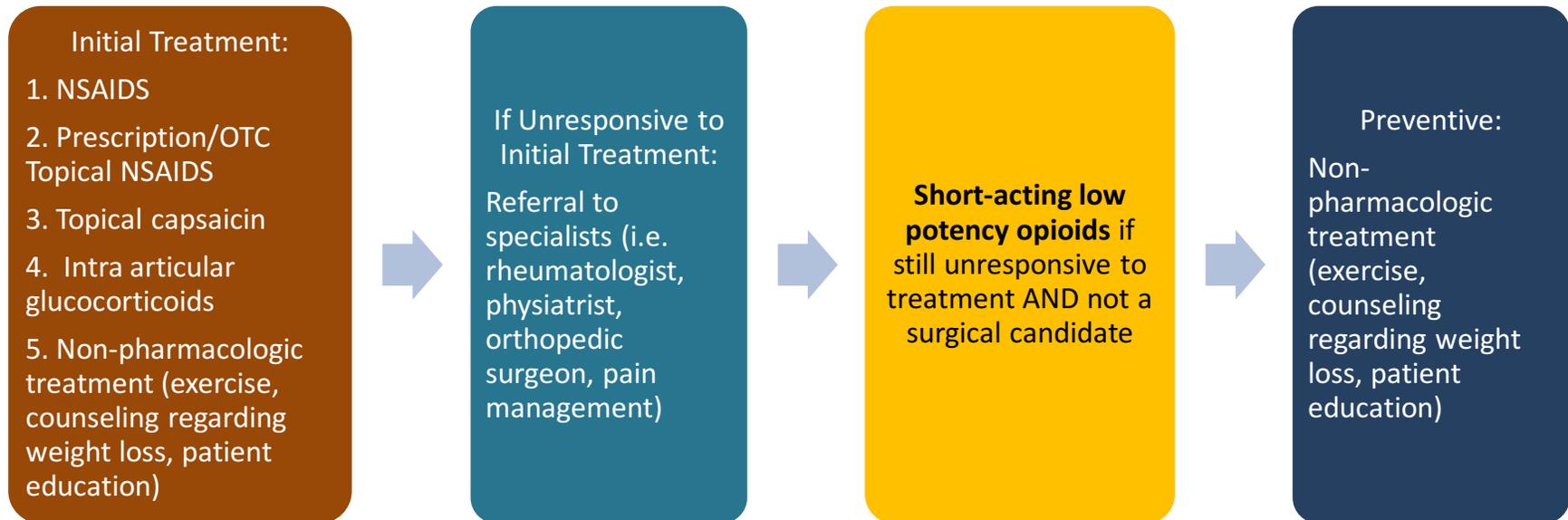


## CLINICAL BEST PRACTICE GUIDELINES FOR COMMON CHRONIC PAIN CONDITIONS

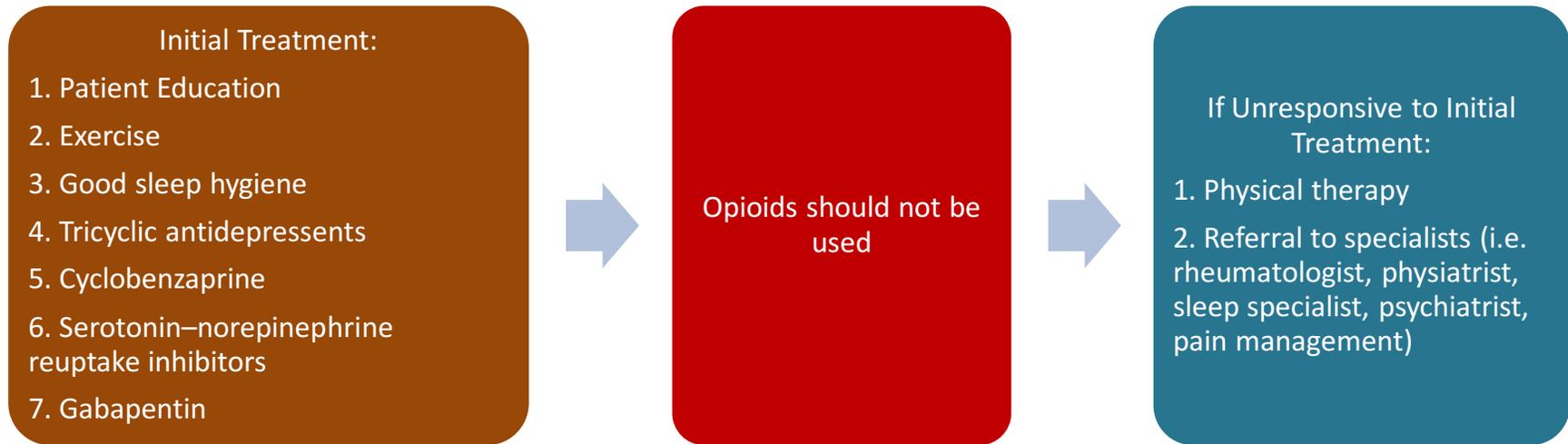
### Migraine



### Osteoarthritis



## Fibromyalgia



## Carpel Tunnel Syndrome (Neuropathic Pain)



## POLICY HISTORY

02/20/2017: Guidelines approved by Pain Management Physician Advisory Committee

## SOURCES

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