

# ELEMENTS OF SYMPTOM ANALYSIS



## PRECIPITATING EVENTS

What brings the pain on (if it's intermittent), or what worsens the pain (or symptom)? (movement, standing, stretching...)



## PALLIATING EVENTS

What relieves or reduces the pain - from a NON-DRUG perspective? (heat, ice, position changes, etc.)



## PREVIOUS TREATMENTS

What medications have you tried to treat the pain (past or current)? What dose? How well did they work and did you have any side effects?



## QUALITY

What words would you use to describe the pain? Sharp, stabbing, shooting, throbbing, aching, gnawing, slashing, grinding, etc.



## REGION/RADIATION

Where is the pain (show me using your hand)? Does it move anywhere else? Is it close to the skin surface, or deeper inside your body?



## SEVERITY

On a 0 (no pain) to 10 (worst imaginable pain) scale, how would you rate your pain right now? On an average day, the best? Worst? Average? At rest? With movement?



## TEMPORAL

How long have you had this pain? Is the pain there all the time? Or does it come and go? If it comes and goes, how many episodes per day? How long does it last? Is that increasing, decreasing or the same?



## U - YOU

How does the pain affect you? What does the pain keep you from doing? How's your sleep? Appetite? Mood? Ability to ambulate?

# SBAR COMMUNICATION

## SITUATION

Concise statement of the problem or situation. Include the patient's name, age, diagnosis, and reason for your call!

## BACKGROUND

Pertinent information related to the problem/situation. Include information collected during symptom analysis.

## ASSESSMENT

Analysis and consideration of options. Include what YOU think the problem is, or state that you don't know!

## RECOMMENDATION

Action that is recommended to be taken. Include a recommended course of action, or state that you don't know next steps!

# SBAR