Recommended Data Standardized Collection

MPAS+ needs to have consistency across data sets from different studies. This consistency will enable decisive meta-studies to be published clarifying this tool’s validity and reliability, as well as, the cost impact of improving patient pain communication. A second goal is to facilitate single subject studies as there are many people with unique combinations of disorders needing scientific attention, and advanced students in need of single subject studies to perfect their clinical and research skills. We encourage therapeutic professionals in training to use the following in their data sets.

Question for ADMITTING, start of new year, or change of personnel dealing primarily with this limited communicator are, mark as many as apply:

How does patient express pain at home? _______ tells caregiver words like “hurt”, “pain”, “ouch” _______ cries. _______ points _______ squirms, body actions. _______ face shows distress _______ uses a pain scale _______ uses assisted communication device _______ meets own needs without other’s help. _______ this has been a problem
Use line below to tell which pain scale used, or describe communication effort or device:

questions for RELEASE from facility, end of year, or end of personnel’s responsibility (signed):
1. Patient’s communication of pain is: _______ clear and consistent, _______ adequate, _______ inconsistent or questionable: __________________________
2. If questionable or inconsistent, was care effected: _______ patient required more staff effort to get needs met; _______ patient’s pain reaction resulted in injury (___ patient or ___ staff);
   _______ patient’s reaction to pain resulted in material waste; _______ patient care required more staff time.
3. If patient response required more staff effort what helped? __________________________
   _______ What hindered? __________________________
4. Practice or use of a pain scale prior to use with pain: _____ none, _____ 1-3 sessions, _____ 4-6 sessions, _____ 7-10 sessions, _____ 11-35 sessions, _____ 36 or more sessions, _____ unknown.
5. Family/caregivers were present during _____ percent of signee’s interaction with patient.
   Family efforts supported patient pain scale training: _____ actively _____ sometimes _____ not observed
   Comments: ________________________________________________________________
   ________________________________________________________________
Signature/Title ___________________________________________________________ Date __________