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**Literature search results**

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<td><strong>Search completed by:</strong></td>
<td>Lesley Firth</td>
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**Search details**

Referring inpatients with acute or chronic pain to pain service/clinic

**Resources searched**

NICE Evidence; TRIP Database; Cochrane Library; CINAHL; EMBASE; MEDLINE; Google Scholar

**Database search terms:** (inpatient* OR in-patient* OR "secondary care" OR "acute care"), refer*, pain*, ("pain clinic*" OR "pain service*" OR "pain unit*" OR "pain management")

**Evidence / Google Scholar search string(s):** (refer OR referral) (inpatients OR in-patients) pain

**Guidelines and Policy**

Gloucestershire Hospitals NHS Foundation Trust
Advice for referrers to the pain service

Map of Medicine
Pain – initial assessment and early management

North Bristol NHS Trust
Referral guidelines to secondary care pain management services, 2009

SIGN
The impact and effectiveness of nurse-led care in the management of acute and chronic pain: a review of the literature.

**Author(s)** Courtenay, Molly, Carey, Nicola

**Citation:** Journal of clinical nursing, Aug 2008, vol. 17, no. 15, p. 2001-2013 (August 2008)

**Publication Date:** August 2008

**Abstract:** To identify, summarise and critically appraise the current evidence regarding the impact and effectiveness of nurse-led care in acute and chronic pain. A diverse range of models of care exist within the services available for the management of acute and chronic pain. Primary studies have been conducted evaluating these models, but, review and synthesis of the findings from these studies has not been undertaken. Literature review. Searches of Pubmed (NLM) Medline, CINAHL, Web of Knowledge (Science Index, Social Science index), British Nursing Index from January 1996-March 2007 were conducted. The searches were supplemented by an extensive hand search of the literature through references identified from retrieved articles and by contact with experts in the field. Twenty-one relevant publications were identified and included findings from both primary and secondary care. The areas, in which nurses, caring for patients in pain are involved, include assessment, monitoring, evaluation of pain, interdisciplinary collaboration and medicines management. Education programmes delivered by specialist nurses can improve the assessment and documentation of acute and chronic pain. Educational interventions and the use of protocols by specialist nurses can improve patients understanding of their condition and improve pain control. Acute pain teams, led by nurses, can reduce pain intensity and are cost effective. Nurses play key roles in the diverse range of models of care that exist in acute and chronic pain. However, there are methodological weaknesses across this body of research evidence and under researched issues that point to a need for further rigorous evaluation. Nurse-led care is an integral element of the pain services offered to patients. This review highlights the effect of this care and the issues that require consideration by those responsible for the development of nurse-led models in acute and chronic pain.

**Source:** Medline

Available in fulltext from Journal of Clinical Nursing at EBSCOhost

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Establishing a nurse-based, anesthesiologist-supervised inpatient acute pain service: experience of 4,617 patients.

**Author(s)** Shapiro, Arie, Zohar, Edna, Kantor, Margalit, Memrod, Judy, Fredman, Brian

**Citation:** Journal of clinical anesthesia, Sep 2004, vol. 16, no. 6, p. 415-420, 0952-8180 (September 2004)

**Publication Date:** September 2004

**Abstract:** To describe our nurse-based Acute Pain Services (APS) and present the results of 4617 patients treated by our service. Descriptive audit. Large referral hospital. 4617 patients treated by the APS. Analgesic regimens [basic pain treatment, patient-controlled analgesia (PCA), epidural analgesia, spinal analgesia,
and wound instillation], as well as the associated patient monitoring and event-response algorithms are detailed. The mean visual analog score (VAS) for pain was low. A VAS for pain greater than 30 mm was noted in 15.3% of all pain scores recorded. Bradypnea (respiratory rate

**Source:** Medline

Available in *fulltext* from *Journal of Clinical Anesthesia* at [ProQuest](https://www.proquest.com/)

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**Google Scholar**

*From the 1st fifty results:*

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