

Helping Adolescents Cope with Pain

Below are some of the non pharmacological pain management strategies that may be helpful for adolescents depending on their individual developmental needs, medical status and caregiver availability.

Adolescent Development

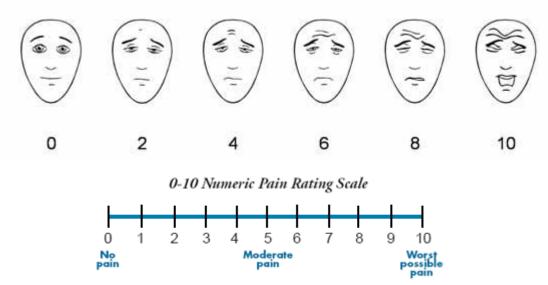
12 - 18 Years Old

- Adolescents are capable of abstract thought and learn about their world by brainstorming possible solutions or outcomes.
- Adolescents seek independence and responsibility to develop their personal identity.
- Adolescents are more self-aware of physical appearances/changes and require privacy to promote selfconfidence.

How Adolescents Perceive Pain

Adolescents are able to describe pain, intensity, and location but often avoid disclosing pain in order to maintain control.

- Adolescents whom have had a procedure multiple times often have increase fear and anxiety.
- Past experiences of being held down and loss of control may deliver apprehension with future painful procedures.
- Adolescents are able to rate pain with special tools, such as an expressive face or a numerical or scale.



(Helping school-age children cope continued on other side)

Helping Adolescents Cope

Allow adolescents to speak directly with medical team to understand reasoning behind procedure or treatment, involvement with decision-making.

- Respect privacy and vulnerability before, during, and after
 - Knock before entering room
 - o Minimal number of staff present
- Preparation
 - Allow opportunity for questions
 - o Explain procedure in age appropriate terms
- Encourage appropriate verbalization of pain
- One voice
 - o Allow for one voice during procedure to limit excessive noise
- Positive Reinforcement
 - Offer encouragement and praise

Distraction During A Painful Procedure

Encourage adolescents to select individual preferences for procedure.

- Distraction:
 - o tablet, music, video games, movies, stories, and art activities
- Stress ball
- Deep breathing
- Progressive Muscle Relaxation
 - o Tightening and relaxing muscles to relieve tension
- Guided Imagery
 - Promotes use of imagination and focused concentration on a story or script

Rollins, J. (2005). Meeting Children's Psychosocial Needs. Texas: Pro-Ed.

Hicks CL, von Baeyer CL, Spafford P, von Korlaar I, Goodenough B, The Face Pain Scale – Revised: Toward a common metric in pediatric pain measurement. Pain 2001, 93:173-183. From the *Pediatric Pain Sourcebook*. Original copyright ©2001. Used with permission of the International Association for the Study of Pain and the Pain Research Unit, Sydney Children's Hospital, Randwick NSW 2031 Australia. Version: 24 Sep 2001

Adapted from Jacox, A., Carr, D.B., Payne, R., et al. Clinical Prac5tice Guideline Number 9. Rockville, MD: US department of Health and Human Services, Agency for Health Care Policy and Research; 1994. AHCPR publication 94-0592

Please call your Child Life Specialist for further non pharmacological pain management strategies and support for medical procedures at 312.227.3270.