## Pain Management Planning Worksheet

## Use the 4 Ps to plan pain self-management

**Step 1**: Look through the list of 4 P's on the back of this sheet.

**Step 2**: Add your own strategies to the list that you've found helpful.

**Step 3**: Complete the 4 P's chart below.



Step 5: Discuss any questions or concerns with your healthcare team.

**Step 5**: Add one new strategy at a time per column (e.g., in the "Before" column, add only one of the 4 P's at a time) to determine if it works for you. Remember, some treatments take time and practice to be effective.

**Step 6**: Refer to this chart regularly and modify your strategies as needed. Build a toolbox of strategies to help manage your pain.

Pain management plan for physical activity			
Strategy	BEFORE	DURING	AFTER
Psychological			
Physical			
Pharmacological			
Preventative			

## Four P's of Pain Management

Pharmacological	Psychological
<ul> <li>Match medications to the types of pain (e.g., nociceptive, neuropathic, nociplastic)</li> <li>Goal of medications is to make you more comfortable when you move or sleep while avoiding adverse effects such as constipation, drowsiness, or increased nervous system sensitivity.</li> <li>Medications will not likely get rid of your pain.</li> </ul>	<ul> <li>Pain neurophysiology education (i.e., how and why the brain produces pain)</li> <li>Mindfulness exercises</li> <li>Spiritual practices or rituals (e.g. prayer, meditation, smudging, finding purpose)</li> <li>Relaxation exercises (e.g. imagery, deep breathing)</li> <li>Cognitive behavioral therapy</li> <li>Acceptance based therapy</li> <li>Stress management</li> <li>Hypnosis</li> <li>Social support</li> </ul>
Physical	Preventative
<ul> <li>Passive</li> <li>Thermal applications (heat/cold packs)</li> <li>Manual therapies (e.g. massage, joint mobilizations or manipulations)</li> <li>Electrical (e.g. TENS)</li> <li>Acupuncture</li> <li>Active</li> <li>Therapeutic exercises (e.g. flexibility, strength)</li> <li>General activity (e.g. cardiovascular fitness)</li> <li>Interrupt sedentary time (e.g. 5 minutes/hour of gentle movement such as shoulder shrugs, arm raises and marching on the spot)</li> <li>Physical activity goals: <ul> <li>Start low and go slow</li> <li>Begin with 50% of amount of activity that causes pain to flare. Increase by 10% every few days.</li> <li>Some people experience an increase in pain while moving and for 2-3 days after.</li> <li>The best cure for increased pain with activity is more activity.</li> <li>Aim for daily activity participation</li> </ul> </li> </ul>	<ul> <li>Modify exercises to improve comfort while remaining active.</li> <li>Splints, braces, or orthotics prescribed by a healthcare provider</li> <li>Mobility aides (e.g. cane, walker, wheelchair)</li> <li>Postural or positioning changes (e.g. sleeping surfaces – mattress and pillow; chair)</li> <li>Activity pacing (e.g., balance housework or work with physical activity)</li> <li>Ergonomic set up of work stations</li> <li>Sleep hygiene education and training</li> <li>Lifestyle changes (e.g. weight-loss, healthy eating, smoking cessation)</li> <li>Condition/disease management (if applicable)</li> </ul>

## **Physical Activity Adherence Promoting Skills**

- Know your physical activity motivators what benefit will you get from being active today?
- Set specific, measureable, achievable, relevant, and time-based goals
- Identify possible barriers to physical activity and make plans to overcome those barriers
- Review your physical activity progress monthly. Lapses in activity participation are normal; however it is important to keep practicing the skills that will help you remain active.