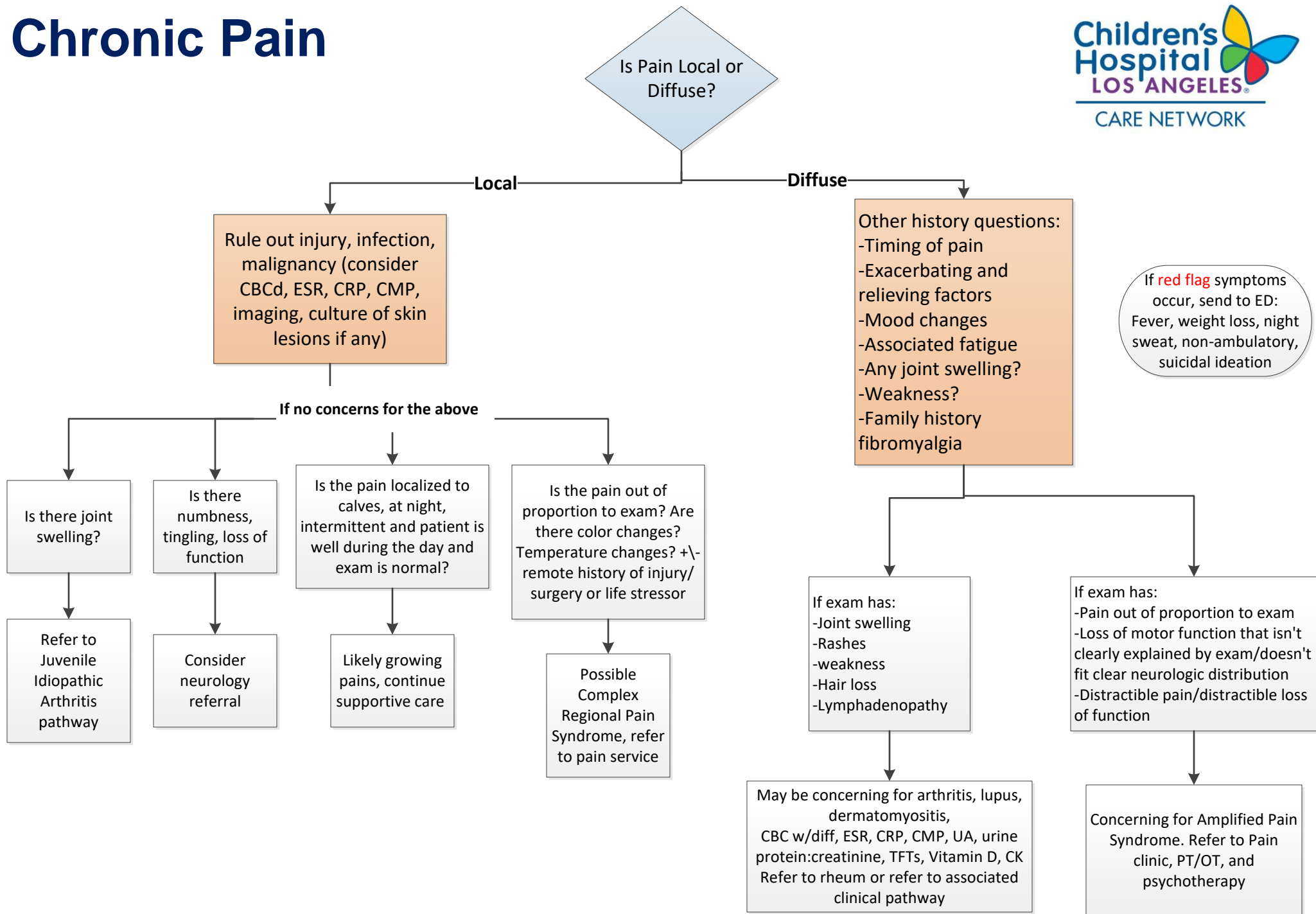


# Chronic Pain



Is Pain Local or Diffuse?

Local

Diffuse

Rule out injury, infection, malignancy (consider CBCd, ESR, CRP, CMP, imaging, culture of skin lesions if any)

Other history questions:  
-Timing of pain  
-Exacerbating and relieving factors  
-Mood changes  
-Associated fatigue  
-Any joint swelling?  
-Weakness?  
-Family history fibromyalgia

If red flag symptoms occur, send to ED:  
Fever, weight loss, night sweat, non-ambulatory, suicidal ideation

If no concerns for the above

Is there joint swelling?

Is there numbness, tingling, loss of function?

Is the pain localized to calves, at night, intermittent and patient is well during the day and exam is normal?

Is the pain out of proportion to exam? Are there color changes? Temperature changes? +/- remote history of injury/surgery or life stressor?

Refer to Juvenile Idiopathic Arthritis pathway

Consider neurology referral

Likely growing pains, continue supportive care

Possible Complex Regional Pain Syndrome, refer to pain service

If exam has:  
-Joint swelling  
-Rashes  
-weakness  
-Hair loss  
-Lymphadenopathy

If exam has:  
-Pain out of proportion to exam  
-Loss of motor function that isn't clearly explained by exam/doesn't fit clear neurologic distribution  
-Distractable pain/distractable loss of function

May be concerning for arthritis, lupus, dermatomyositis, CBC w/diff, ESR, CRP, CMP, UA, urine protein:creatinine, TFTs, Vitamin D, CK Refer to rheum or refer to associated clinical pathway

Concerning for Amplified Pain Syndrome. Refer to Pain clinic, PT/OT, and psychotherapy