In Case of Emergency: What to Expect and How to Prepare

Almost everyone who lives with pain has been to the emergency room at some time.
You may have gone because your pain was out of control and you could not reach your own health care team. You may have gone because you feared that your pain was a sign of a new medical problem. You may have gone because you have no insurance. Or your own doctor may have sent you there.

A randomized survey conducted by the ACPA and the American College of Emergency Medicine Physicians found these reasons and more among the 500 people with recurring or chronic pain who visited the emergency department (ED) once or more in the last two years.

While most of the people surveyed were satisfied with their treatment in the ED, there were important gaps between what people expected from their visit and what they experienced. This brochure can help you know what to expect in case you need to go to the ED in the future. When you are prepared, you are likely to have a more positive experience.

Preparing for an Emergency Department Visit

If it is possible, go to the emergency department of the hospital that your doctor is affiliated with. This will allow the ED staff to get access to your medical records, which can be very helpful.

You can make the process go more smoothly if you come prepared. When you are in crisis you may not be able to think clearly, so it’s a good idea to have this information ready in an envelope or folder you can just grab on your way out the door.

Bring with you:
- Your insurance card;
- The name and contact information for your regular physician; Your pain diagnosis, if you have one, and any other conditions you have been diagnosed with, such as diabetes or a heart condition;
- A list of your current medications, who prescribed each, your current dosage, and how often you take them;
- Be sure to include:
  - Prescription medications
  - Over the counter medications
  - Vitamins
  - Herbal supplements
- A list of any devices or other types of intervention you now use, such as a pump, nerve block, or stimulator;
- A list of any medications that you don’t tolerate well or have had a bad reaction to in the past;
- A list of your allergies.
What to Expect in the ED

The emergency department is meant to provide treatment for sudden, extreme, or unstable illnesses or accidents. It cannot take the place of regular care from a family doctor or pain specialist. But it can help you get through those times when your pain breaks through or you have some other critical event.

When you need to go to the emergency department, you have a right to:
• Be treated with respect;
• Have your problem taken seriously;
• Be seen as soon as possible, given the other cases also waiting for care (some may be more serious than they appear);
• Receive appropriate care for your condition and treatment to reduce your immediate pain;
• Be given a referral to a physician or clinic that can provide the ongoing care you need.

In most EDs, there is a process for patient intake. The ED staff will take your basic information when you first enter. The tips earlier in this brochure can help you know what to bring to make this go more quickly.

“Why do I have to wait so long?”

Then, your case will be triaged—assigned a spot on the list of patients to be seen based on how critical their conditions are. Be prepared to wait. This is not a sign that your pain is not being taken seriously. It just means that there are others whose conditions need attention more quickly.

When your turn comes, you will be taken to a treatment room. Here, a nurse or other health care professional will take your temperature and blood pressure and ask other basic questions about your condition. He or she will pass this information on to a doctor.

You may need to wait again before you see the physician. Waiting is awful when you are in pain, but remember that it is likely that other patients have arrived (perhaps by ambulance or helicopter) who need care more critically.
When You See the Doctor

In most health care settings, your time with the doctor will be limited. This is especially true of the emergency department, where the goal is to address your immediate crisis and help make you stable until you can see your regular health care provider.

Be prepared to briefly describe your current pain problem. Include:
- Location of your pain;
- Its intensity on a scale of ten;
- When this pain flare began;
- Anything that may have recently aggravated your pain;
- What helps and what makes it worse;
- Medications that have helped your pain before;
- How it feels. Here are some words you might use to help the staff understand what you feel:
  - aching
  - nagging
  - stabbing
  - burning
  - numb
  - sharp
  - penetrating
  - gnawing
  - radiating
  - tender
  - throbbing
  - tingling
  - electrical

Once the doctor understands your immediate problem, he or she will do one of several things. This may be:
- admission to the hospital,
- referral to a specialist to see you in the ER, or
- discharge and treatment as an outpatient.

Treatment as an outpatient may include short-term treatment that involves medication or other therapies. You also should be offered a referral to a doctor or clinic so that you can follow up. If you have a regular provider, the ED will send a copy of your record to him or her for follow up.

What Not to Expect

The ED is designed to take care of urgent, short-term problems and to stabilize patients so that they can see their own health care providers in the morning or in a few days.

The ED is not able to do these things:
- Diagnose long-term problems and provide a treatment plan;
- Do extensive lab tests or imaging studies;
- Provide a prescription for more than a few days of medication;

These things are important but they need to be done by your larger-term health care team, not the emergency department. That’s why following up is so vital to your well being.
The Importance of Following Up

Even if you are feeling better, it’s important that you follow up your ED visit with a call or visit to your regular doctor or the clinic or physician the ED staff referred you to. You need to find a long-term strategy for keeping your pain better controlled.

Ongoing pain is a complex condition and its management requires a combination of techniques. These may include medication, physical therapy, counseling, lifestyle changes, and more.

You also have a role to play as the key member of your treatment team. The ACPA manuals and other tools can help you learn more about your pain and the pain management skills that can reduce your suffering.

“Managing chronic or recurrent pain over a long period requires more than an emergency department can offer, and people in this situation often struggle to find solutions that are not readily available,” says Knox Todd, MD, Director of The Pain and Emergency Medicine Institute at the Beth Israel Medical Center in New York City and an ACPA board member. “Emergency physicians are under tremendous pressure to treat growing numbers of patients with fewer and fewer resources. We have the expertise and the tools to treat a person in the midst of a pain crisis in the emergency department, but that person really needs support beyond the hospital’s walls.”
How the American Chronic Pain Association Can Help

Since 1980, the ACPA has taught people with pain the skills, attitudes, and strategies they need to have a higher quality of life, even with pain.

Our mission is:

- To facilitate peer support and education for individuals with chronic pain and their families so that these individuals may live more fully in spite of their pain;
- To raise awareness among the health care community, policy makers, and the public at large about issues of living with chronic pain.

The American Chronic Pain Association is a nonprofit, self-help, mutual support organization for those with chronic pain. We are nonprofessionals, so we do not provide therapy or medical treatment. The ACPA is an addition to, not a replacement for, the medical care you are receiving.

Our goal is to help people with pain take an active role in the recovery process so that they can improve the quality of their lives and reduce their sense of suffering. We call this making the transition from patient to person.

The ACPA sponsors support groups in the United States, Canada, the United Kingdom, and in many other nations around the world. Group members learn useful pain management techniques through activities and discussion and offer mutual support and acceptance based on personal experience.

In addition, the ACPA provides a wealth of materials, including self-help manuals, videos, workbooks, and other resources that can help people with pain and their families. These materials have been created by people with pain for people with pain; they offer unique insight into the reality of chronic pain and its management.

To learn more about how you can begin to enjoy a better quality of life in spite of pain, visit our web site (www.theacpa.org) or contact the ACPA at 1-800-533-3231. We can help you find a group in your area or start a group with information and support from the national office.