

Condition	Assessment	Interventions	Follow-Up/Evaluation
<b>Pain</b>	<b>Risk Level: Urgent</b>  <input type="checkbox"/> Reports severe debilitating pain- chest abdomen, head/face/jaw <input type="checkbox"/> Reports severe pain after a fall <input type="checkbox"/> Reports sudden severe headache	<b>Immediate Intervention</b>  <input type="checkbox"/> Call 911 ~or~ <input type="checkbox"/> Transportation to ED confirmed <input type="checkbox"/> Support provided via phone until 911 personnel arrived <input type="checkbox"/> Contact MD	  <input type="checkbox"/> Appropriate Home Health staff notified
	<b>Risk Level: Potentially Urgent</b>  <input type="checkbox"/> Reports uncontrolled breakthrough pain <input type="checkbox"/> Reports analgesic not relieving pain and describes pain as not acceptable level	<b>Interventions Required</b>  <input type="checkbox"/> Make home visit <input type="checkbox"/> Contact MD	  <input type="checkbox"/> Appropriate Home Health Staff notified
	<b>Risk Level: Non-urgent</b>  <input type="checkbox"/> Pain medication not adequately relieving discomfort and client wants medication changed	<b>Interventions Required</b>  <input type="checkbox"/> Coordinate care with primary nurse	  <input type="checkbox"/> Schedule on-site visit for next day <input type="checkbox"/> Follow-up phone call

*Decision support tools are “guides” only & may not apply to all clients & all clinical situations. Thus, they are not intended to override clinician’s judgment. Material adapted from HHQIOSC document 8SOW-PA-HHQ06.152.*