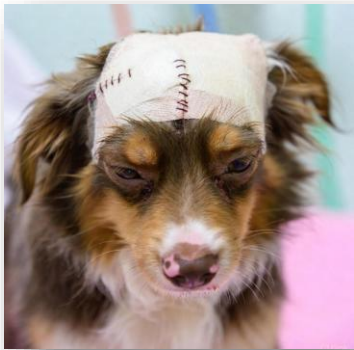


Correctly assessing pet pain after surgery

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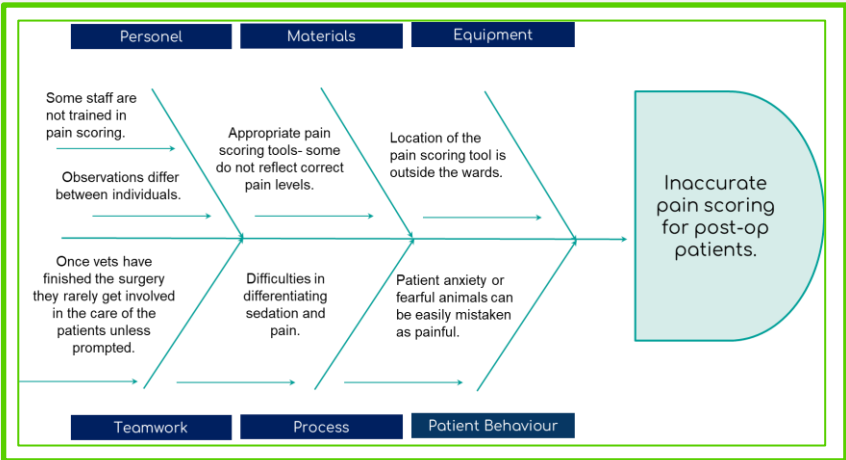
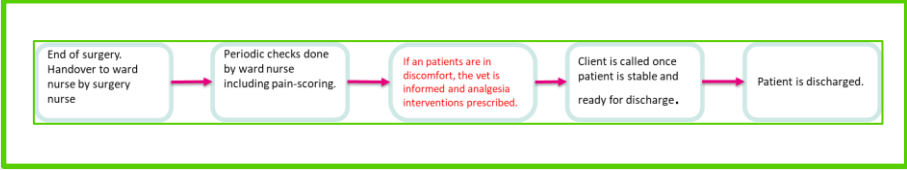
Too often we're failing to identify and treat our patient's pain after surgery. Some howl and hiss and are scared to come back to us. Their owners feel their pain too.

BACKGROUND

Routine surgery in animals is recognised to cause some degree of pain and discomfort in the post-operative period.

- Accurate pain assessment is vital for the provision of appropriate and adequate analgesia
- Veterinary nurses are essential in the recognition and management of pain as part of their responsibilities to deliver compassionate, humane and evidence-based medicine to the animals in their care
- The World Small Animal Veterinary Association (WSAVA) has noted that, despite advances in the recognition of pain, there is still room for improvement in its occurrence and management in practice
- The WSAVA has suggested that pain is the fourth vital sign and should be incorporated into the TPR (temperature, pulse, respiration) assessment of every patient
- Post-operative pain increases the chances of developing complications and therefore if managed well, will lead to better outcomes post-surgery

DIAGNOSTICS



AIM & MEASUREMENT DEFINITION

Aim: By October 2025 all of our patients will have realistic pain scores and nurses are able to get and give any analgesia if needed

Chosen measure: Pain scores recorded by nurses during recovery period after surgery.

Inclusions: Dogs, Cats, Elective procedures (Spays and Castrates)

Exclusions: Exotic pets (Rabbits, hamsters, Guinea Pigs), Lump removals, Other reparative soft tissue or orthopaedic procedures, Dental procedures.

Sampling method and frequency: Retrospective post procedure forms, weekly sampling.

CHANGE IDEAS

List of ideas that can be tested:

- Training of staff. Doing a webinar, in-house course or get an expert to do a lunch or learn.
- Improving the location of the pain scale charts by placing them inside the wards, rather than in a folder outside the wards.
- Adopting a new modified pain assessment tool from the one currently being used.
- Involving the veterinarian in pain assessment.



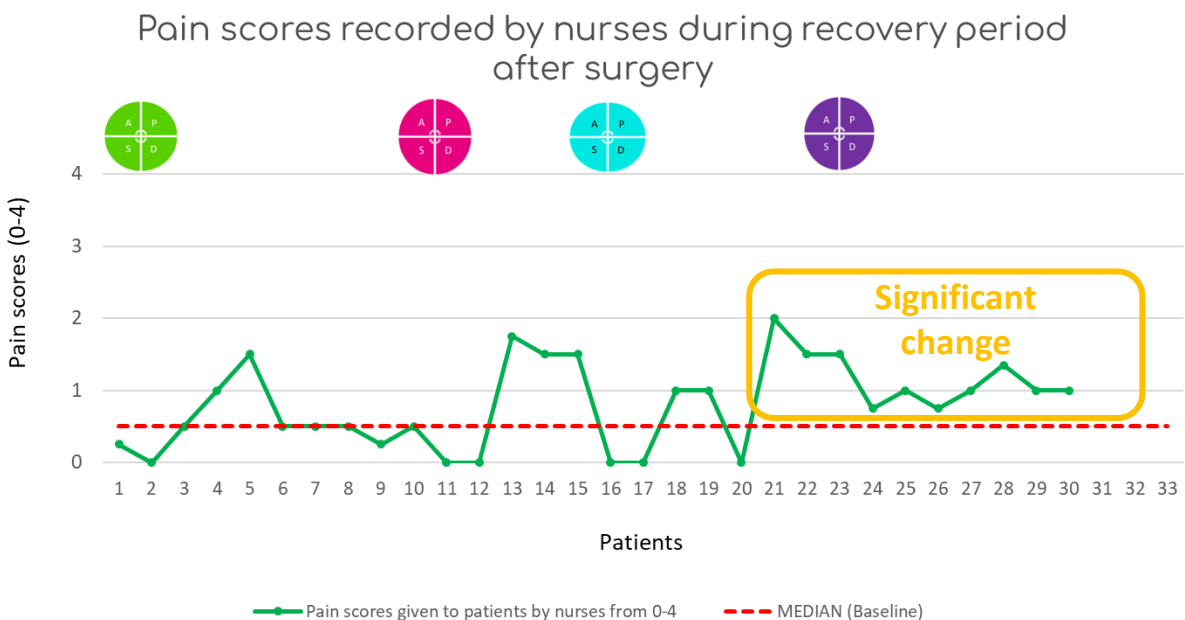
PDSA cycles

PDSA Test #	PLAN	Do	STUDY	ACT
1.1	Had a meeting with the senior nurses to gather support and seek ideas on improving the accuracy of our pain scores.	10.06.2025 Discussed with three senior nurses. Several ideas suggested including adjusting the layout of our post-procedure forms.	The suggested layout will create comments and scores. more space for writing	Adapt : work on redesigning the form.
1.2	Involve the senior nurses on redesigning the new post procedure form.	10.06.25 Involve all the three senior nurses in redesign of the new form.	All senior nurses happy with the new layout of the forms.	Adapt – communicate to the rest of the nursing team for feedback.
1.3	Send WhatsApp to inform all the nurses of the new post-procedure form.	11.06.2025 - WhatsApp message sent to the nurses group. Read and acknowledged same day by all the nurses.	Communication route (WhatsApp) was effective in relaying message. No negative feedback.	Extend...study impact of the new forms on pain scoring.
2.1	Send WhatsApp message to all nurses to inform that we are now using the new form. Provide hard copies of the new forms to nurses. Ensure digital copy available in nurse folder, ready to print if needed.	12.06.2025 WhatsApp message sent to the nurses group. Read and acknowledged same day by all the nurses (7/7).	New form used for all post-surgery assessments by all the nurses.	Extend provision of the new forms onto the next week and monitor if any improvement in pain – score accuracy.
2.2	Monitor if new post-procedure forms have had an impact on the nurse's pain-scoring accuracy on next 10 patients.	Provided the new post-procedure monitoring forms and all nurses made aware through WhatsApp.	Five of the ten (5/10) patients that were reviewed had accurate scores on them. Nurses pain-scoring assessments show improvement.	Again ...and add in other ideas to enhance the improvement.

PDSA Test #	PLAN	Do	STUDY	ACT
3.	Change location of post-procedure forms from outside the wards to inside the wards. This will bring the pain scale charts to a location where the nurses can see them, and this will improve the accuracy of the pain scores that they record.	Informed members of the nursing team through WhatsApp on 23/05/25.	Message was read by all nurses, but none acknowledged reading the message (5/5 negative response). No noticeable change was observed in the pain scores recorded by the nurses on 5 out of the 5 studied cases.	Abandon this change idea.... And try other change ideas.
4.1	Try another pain scale tool alongside the one currently in use and see if any difference in the scores given to the patients.	New pain-scale charts printed out and given to ward nurse of the day on 01/10/2025, to be used alongside the regular pain-scale charts. Ward nurse Rachel.	The average pain scores given for each patient was superior on the new pain scale, compared to the regular one. When averaged the new pain scale scored 0.87/4 and the regular one scored 0.37/4	Extend- dissemination of forms to all staff. Attach the new pain scales to the post-procedure form so that the ward nurses can fill them in with every assessment.



RUN CHART



CONCLUSIONS

- By October 2025, we achieved our aim with our patients receiving a realistic pain scores allowing nurses to get and give any analgesia if needed.
- The initial run-charts showed inconsistencies in pain scores given by the nurses and some patients that were showing signs of pain were given low or no scores.
- Ensuring that each patient had their own pain scoring chart improved consistency in the pain assessments by the nurses.
- Adopting the Glasgow Composite Acute Pain scale (a validated pain measuring scale) instead of the Colorado Acute pain scale (non-validated pain scale) resulted in a statistically significant change, as demonstrated by a run of 10 consecutive data points above the median on the run chart

REFLECTIONS & LEARNING

- The use of diagnostic tools like process maps, bar charts and fishbone diagrams will help you to localise your problems in a process and also give you a snapshot of how you are currently doing. PDSA cycles consist of small steps that are done to effect change in an organisation.
- Involving the team makes the improvement a lot better as there are shared perspectives and can bring in new ideas.

