

Strengthening Pain Content in Baccalaureate Nursing Curricula



*Mapping baccalaureate nursing essentials
with pain management core competencies for
integration within curricula*

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On behalf of the expert panel, I am pleased to present **Strengthening Pain Content in Baccalaureate Nursing Curriculum**. Pain is the most common reason people seek health care, and yet education and training about pain management is lacking and fragmented within all clinical curricula, including nursing. The absence of this content from clinical curricula is striking in light of the magnitude of the issues surrounding pain and pain management. The 2011 Institute of Medicine (IOM) report on *Relieving Pain in America* estimated that over 100 million American adults have chronic pain at a cost exceeding \$600 billion annually. At the same time, the Centers for Disease Control & Prevention released in April 2016 new guidance about the prescription of opioid analgesics in response to widespread concerns about high levels of abuse and addiction related to these agents.

Recognizing the magnitude of these challenges, The Mayday Fund in 2011 supported the development of pain management core competencies for prelicensure learning by a group of 29 North American experts from multiple clinical professions and specialties. These competencies now serve as the foundation for revising and improving prelicensure clinical programs and curricula across all fields of health care, including nursing. These competencies have been widely endorsed by professional organizations and used to assess pain content within national licensing exams.

This document provides nurse educators with a succinct reference guide for integrating pain management content into curricula while meeting the requirements of the American Association of Colleges of Nursing's *Essentials of Baccalaureate Education*. Pain management is an ideal subject to integrate with the Nursing Essentials because it is highly relevant, appropriately complex, and well-suited for implementation with an interprofessional team of clinicians. It is the panel's hope that this reference guide will strengthen nursing education about pain management by integrating pain competencies into nursing baccalaureate education.

Sincerely,

A handwritten signature in black ink, appearing to read "Heather M. Young", with a stylized flourish at the end.

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BACKGROUND

Alleviating pain, whether acute or chronic, is among the most urgent tasks facing any nurse. Pain is both extraordinarily common and challenging to treat. Treatment options abound (pharmacological, device-based, and non-pharmacological) but their use can be highly complex, depending on a host of variables including the nature of the pain, patient risk factors for side effects or addiction, patient comorbidities, and patient psychosocial issues. In the past decade, the widespread use of opioid analgesics, particularly for chronic pain, has been questioned as rates of abuse, diversion, addiction, and overdose deaths have risen significantly. New and revised clinical guidelines seek to stem these problems while simultaneously allowing for rapid and effective relief of patients in pain.

Nurses are on the front lines of these issues and, thus, must be thoroughly up to date on current recommended practices for pain management. This document provides a roadmap for integrating established pain management core competencies into nursing baccalaureate education program, which can help address the urgent unmet need for such education in nursing schools across the country.

PAIN MANAGEMENT CORE COMPETENCIES

The core competencies and supporting core values and principles were developed by an interprofessional expert group comprised of leaders from multiple health professions, including: dentistry, medicine, nursing, pharmacy, physical therapy, psychology, social work, acupuncture, and veterinary medicine. The domains are aligned with the outline categories of the International Association for the Study of Pain curricula.

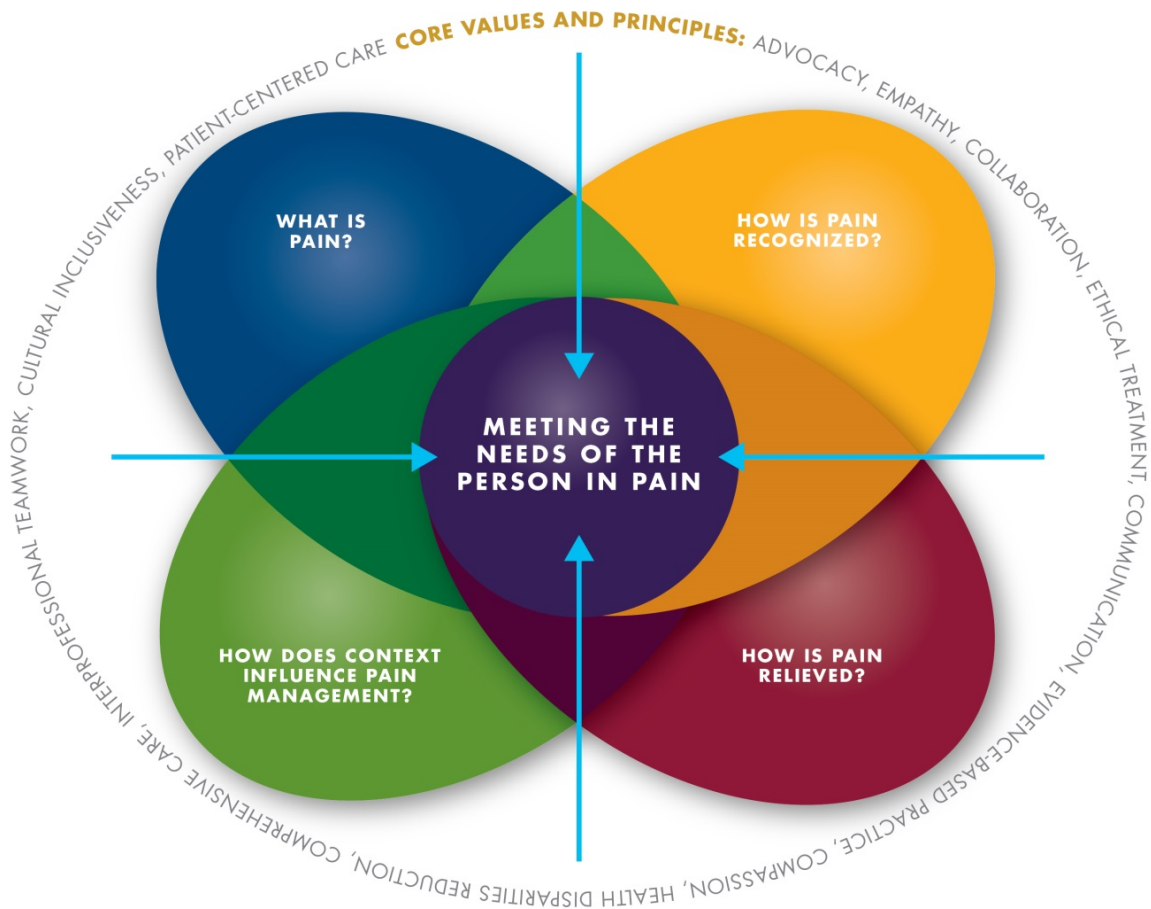
CORE VALUES and PRINCIPLES

The following core values and principles are integral to and embedded within all domains and competencies and are related to many of the nursing essentials. To deliver the highest quality of care, health professionals must be able to determine and address the needs of patients from a variety of cultures and socio-economic backgrounds; advocate for patients on individual, system and policy levels; and communicate effectively with patients, families and professionals. These principles transcend any single domain and reflect the need for evidence-based comprehensive pain care that is patient centered and is delivered in a collaborative, team-based environment.

- Advocacy
- Collaboration
- Communication
- Compassion
- Comprehensive Care
- Cultural Inclusiveness
- Empathy
- Ethical Treatment
- Evidence-Based Practice
- Health Disparities Reduction
- Interprofessional Teamwork
- Patient-Centered Care

DOMAINS

The pain management core competencies are categorized within four domains: multidimensional nature of pain, pain assessment and measurement; management of pain, and context of pain management. The competencies address the fundamental concepts and complexity of pain; how pain is observed; collaborative approaches to treatment options; and application of competencies in the context of various settings, populations and care teams.



Domain One

Multidimensional Nature of Pain: What is Pain?

This domain focuses on the fundamental concepts of pain including the science, nomenclature, experience of pain, and pain's impact on the individual and society.

- 1.1. Explain the complex, multidimensional and individual-specific nature of pain.
- 1.2. Present theories and science for understanding pain.
- 1.3. Define terminology for describing pain and associated conditions.
- 1.4. Describe the impact of pain on society.
- 1.5. Explain how cultural, institutional, societal and regulatory influences affect assessment and management of pain.

Domain Two

Pain Assessment and Measurement: How is Pain Recognized?

This domain relates to how pain is assessed, quantified, and communicated, in addition to how the individual, the health system, and society affect these activities.

- 2.1. Use valid and reliable tools for measuring pain and associated symptoms to assess and reassess related outcomes as appropriate for the clinical context and population.
- 2.2. Describe patient, provider and system factors that can facilitate or interfere with effective pain assessment and management.
- 2.3. Assess patient preferences and values to determine pain-related goals and priorities.
- 2.4. Demonstrate empathic and compassionate communication during pain assessment.

Domain Three

Management of Pain: How is Pain Relieved?

This domain focuses on collaborative approaches to decision making, diversity of treatment options, the importance of patient agency, risk management, flexibility in care, and treatment based on appropriate understanding of the clinical condition.

- 3.1. Demonstrate the inclusion of patient and others, as appropriate, in the education and shared decision-making process for pain care.
- 3.2. Identify pain treatment options that can be accessed in a comprehensive pain management plan.
- 3.3. Explain how health promotion and self-management strategies are important to the management of pain.
- 3.4. Develop a pain treatment plan based on benefits and risks of available treatments.
- 3.5. Monitor effects of pain management approaches to adjust the plan of care as needed.
- 3.6. Differentiate physical dependence, substance use disorder, misuse, tolerance, addiction, and non-adherence.
- 3.7. Develop a treatment plan that takes into account the differences between acute pain, acute-on-chronic pain, chronic/persistent pain, and pain at the end of life.

Domain Four

Clinical Conditions: How Does Context Influence Pain Management?

This domain focuses on the role of the clinician in the application of the competencies developed in Domains 1-3 and in the context of varied patient populations, settings, and care teams. Describe the unique pain assessment and management needs of special populations.

- 4.1. Explain how to assess and manage pain across settings and transitions of care.
- 4.2. Describe the role, scope of practice and contribution of the different professions within a pain management care team.
- 4.3. Implement an individualized pain management plan that integrates the perspectives of patients, their social support systems and health care providers in the context of available resources.
- 4.4. Describe the role of the clinician as an advocate in assisting patients to meet treatment goals.

DEFINITIONS OF TEACHING METHODS

<i>Teaching Method</i>	<i>Description</i>
Case-based learning	Use of real or simulated stories that include patient problems and symptoms. Students analyze these, and working in small groups, arrive at a solution by applying course concepts and evidence found in the literature. Role-playing would help solidify the communication strategy of difficult situations.
Didactic	A Power Point presentation or lecture that may include brief question and answer session.
Problem-based learning	Focused, experiential learning that is organized around the investigation of clinical problems. Learner groups are presented with a case and set their own learning objectives, often dividing the work, teaching each other, guided.
Simulation-based learning	Simulations can be low-tech or high-tech, duplicate clinical scenarios and allow learners to engage in activities that approximate realistic situations.
Team-based learning	Teacher-directed method for incorporating small-group active participation in large-group educational setting. Learners must actively participate in and out of class (preparation and discussion). Shift away from facts to application.
Clinical Experiences	Observation of and practice in inpatient and outpatient healthcare.
Other	Discuss context of pain as observed in art, literature, music, movies. Placing pain in context, to identified preconceived notions of it, identify ideas through media that affect our perceptions and intervention selections.

Reprinted from the Journal of Pain, volume 14/edition 12, Doorenbos, A.Z., Gordon, D.B., Tauben, D., Palisoc, J., Drangsholt, M., Lindhorst, T., Danielson, J., Specter, J. Ballweg, R., Vorvick, L., Loeser, J.D. *A Blueprint of Pain Curriculum across Pre-licensure Health Sciences Programs: One NIH Pain Consortium Center of Excellence in Pain Education (CoEPE) Experience*. Pages 1533-1538, Copyright (2013), with permission from Elsevier

Domain 1: Multidimensional Nature of Pain: What is Pain?

Establishing Learning Goals

Domain 1 focuses on the fundamental concepts of pain, including the science, nomenclature, experience of pain, and the impact of pain on society.

Potential Teaching Methods

Case-based learning, didactic, problem-based learning, or other (e.g., discuss context of pain as observed in art, literature, music, movies; place pain in context to identified preconceived notions of it; identify ideas through media that affect our perceptions and selection of intervention).

Suggested Strategies and Content:

- Include content in anatomy & physiology, foundations of nursing practice, and health policy courses (e.g., the depth of neuromechanisms would include central and peripheral sensitization, alterations in nociceptive processes leading to chronic pain, confounding psychosocial factors leading to chronic pain).
- Use gaming approach to understanding relevant terminology and definitions.
- Ask students to share their experiences with pain.
- For those not yet in clinical rotations, facilitate an interactive discussion on pain in the media; this may include images of people in pain as well as the use of opioids and addiction. Discuss literature that includes pain (e.g., *The Body in Pain* by Elaine Scarry, *The Problem of Pain* by C.S. Lewis, *The Painful Truth: What Chronic Pain is Really Like and Why it Matters to Each of Us* by Lynn R. Webster).
- For students who have had some clinical experiences: process the way they have seen patients assessed and treated; discuss biases that may have come through from staff or the patient (e.g., that documented issues of stigmatization and marginalization).
- In health policy classes, review issues related to prescribing and administration of opioids in their state as well as the impact of pain on the community (e.g., opioid prescribing, prescription monitoring programs, access to pain management, disparities, mental health and addiction support), and the impact of media coverage on pain management.

Domain 1: Multidimensional Nature of Pain: What is Pain?

Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
1.1 Explain the complex, multidimensional and individual-specific nature of pain.	I-1. Integrate theories and concepts from liberal education into nursing practice. I-7. Integrate the knowledge and methods of a variety of disciplines to inform decision making
1.2 Present theories and science for understanding pain	I-1. Integrate theories and concepts from liberal education into nursing practice. I-2. Synthesize theories and concepts from liberal education to build an understanding of the human experience. I-7. Integrate the knowledge and methods of a variety of disciplines to inform decision making III-1. Explain the interrelationships among theory, practice and research VI-6. Advocate for high quality and safe patient care as a member of the interprofessional team.
1.3 Define terminology for describing pain and associated conditions.	I-1. Integrate theories and concepts from liberal education into nursing practice. IV-5. Use standardized terminology in a care environment that reflects nursing's unique contribution to patient outcomes.
1.4 Describe the impact of pain on society.	I-2. Synthesize theories and concepts from liberal education to build an understanding of the human experience. IV-6. Explore the impact of sociocultural, economic, legal, and political factors influencing healthcare delivery and practice. V-1. Demonstrate basic knowledge of healthcare policy, finance, and regulatory environments, including local, state, national, and global healthcare trends.
1.5 Explain how cultural, institutional, societal and regulatory influences affect assessment and management of pain.	I-2. Synthesize theories and concepts from liberal education to build an understanding of the human experience. I-5. Apply knowledge of social and cultural factors to the care of diverse populations. I-6. Engage in ethical reasoning and actions to provide leadership in promoting advocacy, collaboration, and social justice as a socially responsible citizen. I-7. Integrate the knowledge and methods of a variety of disciplines to inform decision making V-1. Demonstrate basic knowledge of healthcare policy, finance, and regulatory environments, including local, state, national, and global healthcare trends. VII-3. Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities, and populations. IX-18. Develop an awareness of patients' as well as healthcare professionals' spiritual beliefs and values and how those beliefs and values impact health care.

Domain 2: Pain Assessment and Measurement

How is pain recognized?

Establishing Learning Goals

Domain 2 relates to how pain is assessed, quantified, and communicated, in addition to how the individual, the health system, and society, affect those activities.

Potential Teaching Methods

Case-based learning, didactic, simulation-based learning, role-playing, clinical experiences.

Suggested Strategies and Content:

- Use pain assessment tools during clinical experiences; discuss the benefits and limitations of each tool for specific populations.
- Present cases that allow the discussion of barriers and facilitators of pain assessment and management. Include non-verbal pain assessment tools, age-specific tools, and illustrations of assessment challenges.
- Simulate pain assessment in a variety of clinical scenarios and contexts; encourage learners to carefully evaluate communication skills and empathic approaches for each member of the group (e.g., pick out stigmatizing terms and figure out terms that will not do that; practice with scripted language that will reinforce a therapeutic relationship; identify body language that portrays indifference or not believing patient).
- Observe pain assessment during clinical experiences; offer constructive feedback.
- Develop a plan of care to manage pain in the clinical setting using assessment findings while integrating patient preferences and goals.
- Use quality improvement and patient safety learning activities as a lens to examine pain assessment and treatment options with an emphasis on contributing to interprofessional teams.

Domain 2: Pain Assessment and Measurement

How is pain recognized?

Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
<p>2.1 Use valid and reliable tools for measuring pain and associated symptoms to assess and reassess related outcomes as appropriate for the clinical context and population.</p>	<p>I-3. Use skills of inquiry, analysis, and information literacy to address practice issues. VII-2 Conduct a health history, including environmental exposure and a family history that recognizes genetic risks, to identify current and future health problems. IX-1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches</p>
<p>2.2 Describe patient, provider, and system factors that can facilitate or interfere with effective pain assessment and management.</p>	<p>I-8. Demonstrate tolerance for the ambiguity and unpredictability of the world and its effect on the healthcare system. II-2. Demonstrate leadership and communication skills to effectively implement patient safety and quality improvement initiatives within the context of the interprofessional team. VI-6. Advocate for high quality and safe patient care as a member of the interprofessional team. XIII-7. Identify personal, professional, and environmental risks that impact personal and professional choices and behaviors.</p>
<p>2.3 Assess patient preferences and values to determine pain-related goals and priorities.</p>	<p>III-6. Integrate evidence, clinical judgment, inter-professional perspectives, and patient preferences in planning, implementing, and evaluating outcomes of care. VII-3. Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities, and populations.</p>
<p>2.4 Demonstrate empathic and compassionate communication during pain assessment.</p>	<p>IX-5. Deliver compassionate, patient centered, evidence - based care that respects patient and family preferences. IX-4. Communicate effectively with all members of the healthcare team, including the patient and the patient's support network.</p>

Domain 3: Management of Pain

How is pain relieved?

Establishing Learning Goals

Domain 3 relates to collaborative approaches to decision-making, diversity of treatment options, the importance of patient agency, risk management, flexibility in care, and treatment based on appropriate understanding of the clinical condition.

Potential Teaching Methods

Case-based learning, didactic, problem-based learning, simulation-based learning, team-based learning, clinical experiences

Suggested Strategies and Content:

- Include pain related content in pharmacology courses, specifically to discuss non-opioids, opioids and adjuvant analgesics (e.g., define multimodal analgesia and how it is different than poly pharmacy; incorporate patient safety with medications).
- Incorporate issues related to substance use disorder in pain management courses and in courses addressing mental health issues to link the interplay of these health problems. Include differentiating seeking relief for pain from prescription opioid misuse or abuse.
- In team based learning, groups can investigate specific acute, chronic, cancer, acute-on-chronic or end of life painful syndromes, developing a treatment plan that includes self-management strategies.
- Observe collaborative pain care and diversity of treatment options during clinical experiences by participating in an interdisciplinary pain management program; including physical, psychological and pharmacological approaches.
- During clinical experiences, identify potential pain treatment options, articulate the risks/benefits, and develop a safe and effective treatment plan (including follow-up care).
- Use quality improvement and patient safety learning activities as a lens to examine pain treatment options with an emphasis on risk assessment.

Domain 3: Management of Pain

How is pain relieved?

Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
3.1 Demonstrate the inclusion of patient and others, as appropriate, in the education and shared decision-making process for pain care.	VI-2. Use inter- and intraprofessional communication and collaboration skills to deliver evidence-based, patient-centered care. IX-4. Communicate effectively with all members of the healthcare team, including the patient and the patient's support network. IX-5. Deliver compassionate, patient centered, evidence-based care that respects patient and family preferences.
3.2 Identify pain treatment options that can be accessed in a comprehensive pain management plan.	VII-10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death. IX-3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings.
3.3 Explain how health promotion and self-management strategies are important to the management of pain.	VII-5. Use evidence-based practices to guide health teaching, health counseling, screening, outreach, disease and outbreak investigation, referral and follow-up across the lifespan. VII-10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.
3.4 Develop a pain treatment plan based on benefits and risks of available treatments.	VII-10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.
3.5 Monitor effects of pain management approaches to adjust the plan of care as needed.	IX-13. Revise the plan of care based on an ongoing evaluation of patient outcomes.
3.6 Differentiate physical dependence, substance use disorder, misuse, tolerance, addiction, and non-adherence and how these conditions impact pain and function.	IX-1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients, using developmentally and culturally appropriate approaches. IX-3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings.

Domain 3: Management of Pain

How is pain relieved?

Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
	IX-9. Monitor client outcomes to evaluate the effectiveness of psychobiological interventions.
3.7 Develop a treatment plan that takes into account the differences between acute pain, acute-on-chronic pain, chronic/persistent pain, and pain at end of life.	IX-8. Implement evidence based nursing interventions as appropriate for managing the acute and chronic care of patients and promoting health across the lifespan.

Domain 4: Clinical Conditions

How does context influence pain management?

Establishing Learning Goals:

Domain 4 focuses on the role of the clinician in the application of the competencies developed in Domains 1-3 and in the context of varied patient populations, settings, and care teams.

Potential Teaching Methods:

Case-based learning, problem-based learning, simulation-based learning, team-based learning, clinical experiences

Suggested Strategies and Content:

- Devote at least one clinical conference to pain issues; have students address pain assessment and management even when pain is not primary concern for a specific patient
- Discuss barriers and interventions to ensure seamless transitions in pain care; address role of various professionals in relieving pain.
- Attend an interprofessional team rounding, care conference, or journal club, and have learners discuss how nursing contributes to the pain care team.
- Discuss access to care and social policy as it pertains to people in pain.
- Discuss how acute pain not treated can lead to chronic pain, the brain in pain.
- Simulate scenarios where the nurse can serve as advocate for a patient with pain (e.g., justifying the use of an elevated dose of an opioid or seeking to increase the dose; advocate for a patient in pain where there is a question of addictive disease in order to minimize risk and maximize efficacy and effectiveness in pain management strategies).
- Have students attend self-management workshops and support group meetings for people with chronic pain disorders (e.g., fibromyalgia, sickle cell disease, neuropathy).

Domain 4: Clinical Conditions	
How does context influence pain management?	
Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
4.1 Describe the unique pain assessment and management needs of special populations.	<p>I-5. Apply knowledge of social and cultural factors to the care of diverse populations.</p> <p>II-1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients using developmentally and culturally appropriate approaches.</p> <p>IV-5. Use standardized terminology in a care environment that reflects nursing's unique contribution to patient outcomes.</p> <p>VII-3. Assess health/illness beliefs, values, attitudes, and practices of individuals, families, groups, communities, and populations.</p> <p>VII-10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.</p>
4.2 Explain how to assess and manage pain across settings and transitions of care.	<p>II-1. Conduct comprehensive and focused physical, behavioral, psychological, spiritual, socioeconomic, and environmental assessments of health and illness parameters in patients using developmentally and culturally appropriate approaches.</p> <p>II-2. Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, health care team coordination, and the oversight and accountability for care delivery in a variety of settings.</p> <p>IX-10. Facilitate patient-centered transitions of care, including discharge planning and ensuring the caregiver's knowledge of care requirements to promote safe care.</p>

Domain 4: Clinical Conditions
How does context influence pain management?

Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
<p>4.3 Describe the role, scope of practice and contribution of the different professions within a pain management care team.</p>	<p>I-7. Integrate the knowledge and methods of a variety of disciplines to inform decision making</p> <p>II-2. Apply leadership concepts, skills, and decision making in the provision of high quality nursing care, health care team coordination, and the oversight and accountability for care delivery in a variety of settings.</p> <p>II-3. Demonstrate awareness of complex organizational systems.</p> <p>VI-1. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e., scope of discipline, education and licensure requirements).</p> <p>VI-6. Advocate for high quality and safe patient care as a member of the interprofessional team.</p> <p>VII-10. Collaborate with others to develop an intervention plan that takes into account determinants of health, available resources, and the range of activities that contribute to health and the prevention of illness, injury, disability, and premature death.</p>
<p>4.4 Implement an individualized pain management plan that integrates the perspectives of patients, their social support systems and health care providers in the context of available resources.</p>	<p>I-5. Use standardized terminology in a care environment that reflects nursing’s unique contribution to patient outcomes.</p> <p>I-6. Engage in ethical reasoning and actions to provide leadership in promoting advocacy, collaboration, and social justice as a socially responsible citizen.</p> <p>II-5. Participate in quality and patient safety initiatives, recognizing the complex system issues, which involve individuals, families, groups, communities, populations, and other members of the healthcare team.</p> <p>II- 11. Employ principles of quality improvement, healthcare policy, and cost-effectiveness to assist in the development and initiation of effective plans for the microsystem and/or system wide practice improvements that will improve the quality of healthcare delivery</p> <p>IV-9. Apply patient-care technologies as appropriate to address the needs of a diverse patient population</p> <p>VII-7. Collaborate with other healthcare professionals and patients to provide spiritually and culturally appropriate health promotion and disease and injury prevention interventions in the healthcare system.</p> <p>IX-5. Deliver compassionate, patient centered, evidence based care that respects patient and family preferences.</p> <p>IX-3. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management, and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings.</p>

Domain 4: Clinical Conditions	
How does context influence pain management?	
Pain Management Core Competency	Related Baccalaureate Nursing Essentials (BNE) Competencies
	IX-4. Communicate effectively with all members of the healthcare team, including the patient and the patient's support network.
4.5 Describe the role of the clinician as an advocate in assisting patients to meet treatment goals.	IV-10. Advocate for the use of new patient technologies for safe, quality care. V-12. Advocate for consumers and the nursing profession. VI-6. Advocate for high quality and safe patient care as a member of the inter-professional team.

RESOURCES

American Association of Colleges of Nursing

The Essentials of Baccalaureate Education for Professional Nursing Practice, <http://www.aacn.nche.edu>

International Association for the Study of Pain Curricula

IASP Interprofessional Pain Curriculum Outline 2012. Education Initiatives Working Group, IP Outline Subgroup: Eloise C. Carr, John H. Hughes, Robert N. Jamison, Hellen N. Kariuki, Jordi Miró, Leila Niemi-Murola, Germán Ochoa, Anibal Patricio Scharovsky, Philip J. Siddall (Co-Chair), Judy Watt-Watson (Co-Chair)

<https://www.iasp-pain.org>

IASP Curriculum Outline on Pain for Nursing, 2012

Task Force Members: Huda Abu-Saad Huijjer, Christine Miasowski (Chair), Robyn Quinn, Alison Twycross

<https://www.iasp-pain.org>

Core Curriculum for Pain Management Nursing

Core Curriculum For Pain Management Nursing, 2nd Ed. Barbara St. Marie, Ed. [American Society For Pain Management Nursing](#), 2010, Dubuque, IA: Kendall Hunt Publishing Company.

Centers of Excellence in Pain Education (CoEPEs)

Case-based modules covering diverse pain topics available for download and use by educators

<http://painconsortium.nih.gov/coepes.html>

Others

- American Pain Society, www.americanpainsociety.org
- Interprofessional Pain Management Competency Program, University of California-Davis, <http://www.ucdmc.ucdavis.edu/advancingpainrelief>
- Interagency Pain Research Coordinating Committee, National Pain Strategy, http://iprcc.nih.gov/National_Pain_Strategy/NPS_Main.htm
- painHEALTH, painhealth.csse.uwa.edu.au/
- Schmidt RF, Gebhart GF. *Encyclopedia of Pain*. 2nd Ed. New York: NY: Springer, 2013
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