

Inadequate pain meds in ER for patients with long-bone fractures

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Image courtesy of Blausen Medical

"A large portion of patients in this cohort did not receive any medication for pain while in the emergency department. Even when patients received an analgesic, one measure of adequate treatment, the PMI, did not meet recommendations for care in the emergency department," the authors write. "Because patients admitted to the emergency department often are especially vulnerable, interventions focusing on improving pain management for that population need to be developed."

More information: [Abstract](#)

[Full Text \(subscription or payment may be required\)](#)

(HealthDay) -- The majority of patients with long-bone fractures receive inadequate pain medication in the emergency department, and disparities in management exist, according to a study published in the May issue of the *Journal of Emergency Nursing*.

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To investigate the adequacy of pain management for patients with long-bone fractures seen in the [emergency department](#), Ptlene Minick, Ph.D., R.N., from Georgia State University in Atlanta, and colleagues conducted an exploratory, correlation design study using data from 218 patients (61 percent female; 63 percent white, 28 percent black, 9 percent other minorities) from two major urban medical centers. The pain management index (PMI) was calculated and used to assess the adequacy of pain management.

The investigators found that, while in the emergency department, 36 percent of patients received no medication, despite having a mean [pain score](#) of 6.9 (on a scale of 0 to 10). The 126 patients who did receive an analgesic had to wait for an average of 1.76 hours for the medication. Of the patients who received [pain medication](#), black patients, younger patients, and those with higher [pain severity](#) were more likely to receive inadequate pain management compared with white patients.

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