**RN Script #4 – GOOD Example (pain management/goals of care)**

*STUDY PARTICIPANT* as NURSE: Hi, [*patient’s name*] I’m [*your name*], the nurse who will be taking care of you today.

*RESEARCH TEAM MEMBER* as PATIENT: Hi, I’m [*your name*].

NURSE: The night nurse said you were having a lot of trouble with pain last night?

PATIENT: Yes, that’s right. I barely got any sleep.

NURSE: I’m really sorry to hear that. That will be a priority for us today, to get your pain better controlled. Are you in pain now?

PATIENT: Yeah, it’s about the same as last night, maybe worse.

NURSE: How severe is your pain now on a scale of 0-10, 0 meaning no pain, 10 is the worst pain you can imagine?

PATIENT: I’d say a 9. I want to say 10, but I guess it could always get worse so I should probably leave that open.

NURSE: Can you tell me some more about the pain, for example where is it and what does it feel like?

PATIENT: It’s mostly in my upper and lower back. It’s the worst back pain I have ever felt. It’s the worst pain I have ever felt, period. It doesn’t feel like a muscle strain or anything, it feels much deeper and stronger. Like a vice is closing around my spine, like I’m being squeezed from the inside out.

NURSE: That sounds really, really difficult. The good news is that the vast majority of the time with fairly simple medications we can significantly reduce pain, and that is going to be a key priority for today.

PATIENT: Yeah, okay. I don’t want to live like this.   
  
NURSE: (pause; count silently to 10).

PATIENT: I don’t mean I want to end it all, although I would be lying if I said it hadn’t crossed my mind once or twice. But I would never do anything like that. I have too much to live for with my wife and kids and everything. But what kind of life is this? I’m in terrible pain all the time. I can’t sleep. I don’t want to see anybody. I’m irritable.

NURSE: It sounds like the pain is making it hard to be yourself.

PATIENT: Exactly. I’m usually a very happy and social person. Yesterday I snapped at my son because I hurt so much. That’s not like me at all. And I felt terrible about it. He was just trying to help, but my back hurt so much. It feels like it will never change.

NURSE: It’s very normal to not be ourselves when we are hurting. We definitely need to work to get a better plan in place to manage your pain. Can I ask what you mean when say ‘it will never change?’

PATIENT: I guess I’ve given up hope I’ll ever feel like myself again.

NURSE: That sounds like it could be a scary feeling.

PATIENT: Yeah, it’s really scary. And sad. Like, where did my life go? I don’t know how much time I have left, but I definitely don’t want it to be like this.

NURSE: I understand that. Can I ask what feels most important to you now?

PATIENT: Well, the doctors told me that this pain is because the cancer has spread to my spine. They told me that when they came around last night. Obviously, that’s not great news. They’re talking about maybe doing some radiation, and I guess I’m okay with that, especially if it will help the pain, but I don’t want to live at the hospital all the time like I had to do when I was getting chemo.

NURSE: It sounds like being at home and staying out of the hospital as much as possible is an important goal?

PATIENT: Yeah, that’s right.

NURSE: Are there other things that feel important to you?

PATIENT: Well, getting this pain lower is probably top of the list. Staying out of the hospital, like I just said. Spending time with my family. I’d really like to get up to New Jersey. I have family there, they have a little cottage near the shore and it’s one of my favorite places. I’d like to get there and have some time by the ocean while I’m still able to travel.

NURSE: That sounds like a very special place.

PATIENT: It is! It’s where I met my wife, when we were in college. And it’s where we’ve gone with our family every year for the past 15 years.

NURSE: Have you shared this goal with the doctors or anyone else on the team?

PATIENT: I talked about it yesterday a bit with the social worker. He was very nice. I didn’t tell the doctors because I don’t want them to think I am giving up.

NURSE: I understand. I think a lot of patients worry about that. Maybe it would be helpful for us to schedule a meeting with you and any family you want here with the other members of your cancer care team – the doctors, social worker, the nurses – so we can talk about next steps and what is most important to you. What do you think of that idea?

PATIENT: I think that’s a good idea. It would be helpful to get everyone on the same page.

NURSE: Yes, I think so too. And in the meantime, I’m going to page the doctor right now and see if we can get a consult to have someone from our palliative care team come speak with you. Have you ever met with the palliative care team before?

PATIENT: No…who are they? Is that hospice?

NURSE: No, the palliative care are experts at managing difficult pain and they work with all types of patients, in all types of situations. I think it would be helpful for them to evaluate you and provide some recommendations to the primary team. And while I’m working on that, I will bring you an extra dose of your pain medication now.

PATIENT: Okay, that sounds good. Thanks for talking with me.

NURSE: Of course. I’m glad we had a chance to talk. I’ll be right back with your pain medication.