



## **Pediatric Pain Management Rotation:**

Welcome to your pediatric pain management rotation. Your time on our service will be both interesting and educational. Attached are the goals and objectives for the rotation. Please read completely, as you will be responsible for the following information.

**Inpatient:** Appropriate dress for the pediatric pain rotation includes either professional attire or scrubs. Expected arrival time is 07:30 or earlier, allowing adequate time for thorough pre-rounding. The pain office is located on the third floor (room 3835) of the West Building at Stanford Children's Hospital. If you are at the train on the first floor, take the stairs near the elevators two floors up to the third floor and turn left out of the elevators. Make your first left into the circular hallway, and you will arrive at a sign that says, "pain and massage office". Please locate the office prior to your first day and ask for help finding it as needed.

When you arrive, you and the nurse practitioner on service (Chris Almgren or Wendy Webb) will pre-round on the full list of patients. Pre-rounding consists of reviewing patients' interval/overnight history, events, vitals, analgesic use, PRNs required, etc. The NP can show you how to do this on your first day. You will also want to review that day's OR schedule in order to evaluate which patients might be admitted to the pain management service post-operatively. Our nurse practitioners are knowledgeable about the basics of Stanford Children's pediatric pain management and our typical workflow and are thus valuable resources. After pre-rounding is complete, the attending will join and you will round as a team.

Once you have gotten your bearings on service, you will be expected to begin taking the lead on our service. By the end of your time with us, you should be able to completely lead pain management rounds. For each patient, you should have a plan prepared with regards to changes in PCAs, management of neuraxial or peripheral catheters, adjustments of medication regimens, etc. After gathering input and history from the RN assigned to each patient regarding interval events, please encourage your attending to review options for the plan with you prior to entering the patient's room. This will maintain a cohesive presentation for each patient and their family. When you walk into a patient's room, you will introduce yourself and the team and will then lead the conversation. After discussing your plan with all present, clearly summarize the plan to the patient and family. As time allows, it is encouraged to briefly outline that day's pain control plan on the patient white board in legible writing so that families may have a thorough understanding of the analgesic plan; this will encourage involvement and relieve families and patients of having to recall everything that was discussed. Please leave room for questions and parental input throughout each visit.

After rounds are complete, the notes will be divided up between the nurse practitioner, the attending, and you. The nurse practitioner or attending can go over the technical details of writing the notes. Remember to send all notes to the attending pain physician for cosigning. For the rest of the day, you will discuss the pain recommendations for consulting patients (all ICU patient plans outside of catheter mgmt, all general surgery patients, all general pediatrics service patients including Heme/Onc, Gen Peds, GI etc), or inform of the pain plan for patients referred to us to manage (usually orthopedic patients, admissions from our clinic that are on our service), as well as to follow up on any outstanding issues. You will also be responsible for following up with the assigned anesthesiologists in the OR regarding their interventions on patients who are to be admitted to the pediatric pain service.

Finally, you will be expected to see new consults. Once you have seen a new consult, you are encouraged to take a primary role in assessing and managing that patient as if they were your own. This includes following the patient while they are in the hospital and creating the plan on a daily basis. Additionally, if you are involved in a procedure on a patient, the same will hold true.



Most of the patients on the inpatient pain service have some form of acute pain related to a medical illness or its treatment including surgical intervention. Some of the patients on the inpatient pain service are children or young adults with chronic pain who have an acute problem. They may have had an operation, a pain intervention or have an acute flair.

**Procedures:** You are encouraged to participate in any chronic pain interventional procedures in the IR suite with one of the chronic pain attendings. These procedures are typically performed a few times per week.. These are also shared with the interventional pain fellows, who will often take precedence due to the necessity of these procedures for their completion of training.

**Requests:** All requests for time off during your rotation must be approved by both the inpatient pain attending and myself well in advance of your rotation. The general understanding is that there will be no vacation taken during your pain rotation. If any approved time away from service results in a failure to meet the educational objectives, it will be your responsibility to find the time to make up for such deficits.

**Educational Objectives:** It will be your responsibility to ensure that you have met your educational goals by the end of your time with us.

Please read and review the 5 lectures on the Stanford Pediatric Anesthesia website at <http://med.stanford.edu/pedsanesthesia/education/teaching-materials.html>, Under Pain Service Required Reading

Your rotation will not be considered complete until form is completed and returned to Dr. Agarwal, or Dr. Julie Good. This can be done by printing out the document and sending a scanned document once completed on paper or by having the attendings sign an electronic form as you go and emailing the completed electronic form. The latter is preferred. Please note that if you would like to replace one or more of the pre-assigned topics with topic(s) that particularly interest you, feel free to make such requests and we are more than happy to be as accommodating as possible. Additional journal articles, keyword topics, lectures, etc. may be assigned on an individual basis at the discretion of each attending.

**Outpatient:** You have the option to participate in outpatient pain clinic. Please let us know if you are interested and we will do our best to arrange time, factoring in our other rotators. Contact Annah Hoang at [choang06@stanford.edu](mailto:choang06@stanford.edu) for help scheduling time, if you are interested. The clinic is located at 321 Middlefield in Menlo Park, suite 225. There is ample parking available that does not require a permit. Please wear professional attire; a white coat is not necessary.

The clinic typically begins at 0900, but it is recommended that you arrive at 0830 to review the patients for the day. There is typically a new patient evaluation that occurs from 0900 until 1130 and then follow-up appointments thereafter. Our new patient evaluations include a pediatric pain attending and a pediatric pain psychologist at a minimum and may include a physical therapist, as appropriate. There are 1-2 pain attendings in clinic on a given day.

Upon arrival, please discuss with the attending of the day which patients would be most appropriate for you to see. Also, please discuss with the attending before seeing the patient if you will lead the discussion or write the note for the patient. You will observe initially before being asked to see patients. There are also patients that present for acupuncture. Please feel free to observe these procedures if you would like.

You will find that the faculty enjoy teaching and having trainees on service. We are continually working to improve your experience. If you have any constructive criticism of the rotation, please feel free to contact me. Enjoy your time on the pediatric pain service,



Ardin S. Berger, DO (they/them)

## Pediatric Pain Management Inpatient Rotation

Rotator's Name: \_\_\_\_\_

Dates of Rotation: \_\_\_\_\_

Topic (≥5 required for completion)	Date	Lecturing Attending (printed name/signature)
Basics of Pediatric Pain	_____	_____ _____
Opioid Analgesics (PCAs, SUD, etc.)	_____	_____ _____
Adjunctive Medications	_____	_____ _____
Neuraxial Blockade	_____	_____ _____
Specific Pain Conditions	_____	_____ _____
Fill-In Topics:	_____	_____ _____



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