

## □ Symptom Assessment Acronym

The Symptom Assessment Acronym is a tool to aid in a systematic assessment approach to whatever hospice palliative care symptom you are reviewing. Other aids are available however; in Fraser Health we found this Symptom Assessment Acronym helpful. We recommend this tool for our Fraser Health care providers to guide a consistent and comprehensive symptom assessment in hospice palliative care.

### *Assessment using Acronym O, P, Q, R, S, T, U and V* <sup>(1,2,3,4,5,6,7,8,9)</sup>

<b>O</b> Onset	When did it begin? How long does it last? How often does it occur?
<b>P</b> Provoking / Palliating	What brings it on? What makes it better? What makes it worse?
<b>Q</b> Quality	What does it feel like? Can you describe it?
<b>R</b> Region / Radiation	Where is it? Does it spread anywhere?
<b>S</b> Severity	What is the intensity of this symptom (On a scale of 0 to 10 with 0 being none and 10 being worst possible)? Right now? At best? At worst? On average? How bothered are you by this symptom? Are there any other symptom(s) that accompany this symptom?
<b>T</b> Treatment	What medications and treatments are you currently using? How effective are these? Do you have any side effects from the medications and treatments? What medications and treatments have you used in the past?
<b>U</b> Understanding / Impact on You	What do you believe is causing this symptom? How is this symptom affecting you and / or your family?
<b>V</b> Values	What is your goal for this symptom? What is your comfort goal or acceptable level for this symptom (On a scale of 0 to 10 with 0 being none and 10 being worst possible)? Are there any other views or feelings about this symptom that are important to you or your family?

\* Physical Assessment (as appropriate for symptom)

## □ References

1. Roberts D, McLeod B. Hospice Palliative Care Symptom Assessment Guide and Guideline for Use of the Form. In: Fraser South Health Region, editor. 1st ed: Fraser South Health Region,; 2004.
2. Jarvis C, Thomas P, Strandberg K. The Complete Health History. Physical examination and health assessment 3rd ed. Philadelphia: W. B. Saunders Company; 2000. p. 79-102.
3. McCaffery M, Pasero C. Assessment. Pain: Clinical Manual. 2nd ed. St. Louis: Mosby; 1999. p. 35-102.
4. Pain - General Information. In: Neron A, editor. Care Beyond Cure A Pharmacotherapeutic Guide to Palliative Care: Pharmacy Specialty Group on Palliative Care - Canadian Society of Hospital Pharmacists in collaboration with Sabex Inc.; 2000. p. 5-8.
5. Bates BP, Benjamin R, Northway DI. PQRST: A mnemonic to communicate a change in condition. Journal of the American Medical Directors Association. 2002 January/February;3(10):23-5.
6. Foley KM. Acute and Chronic cancer pain syndromes. In: Doyle D, Hanks G, Cherny NI, Calman K, editors. Oxford Textbook of Palliative Medicine. 3rd ed. Oxford, England: Oxford University Press; 2004, paperback 2005. p. 298-316.
7. Downing GM. Pain - Assessment. In: Downing GM, Wainwright W, editors. Medical Care of the Dying. 4th ed. Victoria, B.C. Canada: Victoria Hospice Society Learning Centre for Palliative Care; 2006. p. 119-58.
8. Part I Physical Symptoms. In: Peden J, deMoissac D, MacMillan K, Mushani-Kanji T, editors. 99 Common Questions (and more) about hospice palliative care A nurse's handbook. 3rd ed. Edmonton, Alberta: Regional Palliative Care Program, Capital Health; 2006. p. 2-96.
9. Muir J. Unrelieved Pain. Nursing bc. 2006 October;38(4):22-5.