

Pain Management Strategy Agreement

Date: _____

Patient Name: _____

Patient ID: _____

Provider Name: _____

Introduction

This agreement outlines the pain management strategy developed collaboratively between the patient and the healthcare provider. The goal is to achieve effective pain control while ensuring safety and compliance with treatment protocols.

Pain Management Goals

- Understand and optimize the patient's pain relief.
- Educate the patient about pain management options.
- Establish a regular follow-up schedule.

Agreements

1. The patient agrees to follow the prescribed pain management plan.
2. The provider agrees to monitor the patient's progress and adjust the plan as needed.
3. Both parties will communicate openly about the effectiveness of treatments and any side effects.

Medication Management

The following medications will be part of the pain management strategy, to be used as prescribed:

- Medication 1: _____
- Medication 2: _____

Follow-up and Review

Regular follow-ups will occur every _____ (time frame) to assess the effectiveness of the pain management strategy and make necessary adjustments.

Patient Consent

By signing below, the patient agrees to adhere to the pain management strategy outlined above.

Patient Signature: _____ Date: _____

Provider Signature: _____ Date: _____