Comparison of Patient Reported Visual Analog Pain to Physician vs Nurse in Operative and Nonoperative Foot and Ankle Setting.

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Statement of Purpose
The purpose of our study was to explore the difference between the VAS score among the surgical and nonsurgical patients when obtained by a nurse and a physician.

Methodology and Hypothesis
Patients were divided into two groups: The first group consisted of 10 patients who presented to the clinic for non-surgical visits; the other 10 presented for surgical consultation related to foot and ankle pathology. A pictorial VAS was used where 0 and 10 indicated “no pain” and the “worst possible pain,” respectively. Each patient pointed to his or her current level of pain on the pictogram. A podiatric resident physician and a nurse interviewed each patient and collected information separately. Statistical analysis was performed using chi-square analysis where p <0.05 was statistically significant. We hypothesized that there would be a significant difference in the VAS scores acquired by the physician and the nurse for both the surgical and the nonsurgical groups.

Procedures
No surgical procedures were performed during the evaluation. Patients may have undergone surgery prior to the evaluation.

Literature Review
The Visual Analogue Scale (VAS) is frequently used to measure the intensity of pain in many clinical settings.

Results
Two patient’s scores were not included in the study due to incomplete data. Of the remaining 18 patients, the mean age was 55.6 (24-78). Of these patients, 9 (50%) were female and 9 (50%) were male. The mean BMI was 27.8 (23-35). There were 5 (27.78%) patients with documented current Buprofen consumption for chronic pain during the time of the study. The mean difference in the VAS score was 3.9 (obtained by the nurse) and 4.6 (obtained by the physician) among the nonoperative patients. The Mean difference in the VAS scores among patients seeking surgical consult was 3.0 (obtained by the nurse) vs 1.3 (obtained by the physician). The information are graphically represented in figure 2 and figure 3.

Analysis and Discussion
The Visual Analog Scale is a valuable tool in a podiatric clinical setting. The VAS requires little training to administer and score. It was found to be acceptable to patients. In this case study, we found that the patients who presented for surgical consultations claimed that they had far more pain than their non-surgical counterparts. Based on the analysis, we also discovered a significant difference between the pain measurements obtained by a nurse versus a physician. This series looks to illustrate that there are disparities when VAS is used in a podiatric clinical setting. Further randomized control trials are needed to better understand the reliability.

References
2) A Comparison Of The Verbal Rating Scale And The Visual Analog Scale For Pain Assessment. (2004). The internet Journal of Anesthesiology, 8(1). doi:10.5580/1a73