



Green Zone

ALL CLEAR (GOAL)

- Your comfort level is _____
(0 - 10 scale where 0 = no pain and 10 = worse pain ever had)
- You are able to do basic activities and rest comfortably
- You do not have any new pain
- If you're taking opioid pain medication, your bowels are moving at least every 2 - 3 days

Doing Great!

- You are managing your pain at an acceptable level for you
- Actions:
 - Continue your medicines as ordered
 - Continue _____ (ice, heat, therapy, etc.) along with your medicines
 - Keep all doctor visits
 - Continue regular exercise as prescribed

Yellow Zone

CAUTION (WARNING)

If you have any of the following:

- Pain that is not at your comfort level with your usual treatments
- You are not able to do basic activities or rest comfortably
- New pain you have never had before
- If you are taking opioid medication, your bowels have not moved in 2 - 3 days
- You are sleeping more than usual
- You feel sick at your stomach
- You cannot take your medicine

Act Today!

- Your pain control plan may need to be changed
- Actions:
 - **Call your home health nurse**

(agency's phone number)
 - **Or call your doctor**

(doctor's phone number)

Red Zone

EMERGENCY

- You cannot get any relief from your usual treatments
- You have new, severe pain
- If you are taking opioid pain medication, your bowels have not moved for more than 3 days
- You are extremely sleepy
- You are throwing up
- You are confused

Act NOW!

- You or your family need to call your nurse or doctor right away
- Actions:
 - **Call your home health nurse**

(agency's phone number)
 - **Or call your doctor right away**

(doctor's phone number)