



## Paediatric Chronic Pain Service – Referral Criteria

## **Inclusion criteria**

- Under 17 1/2 years with chronic pain as the primary complaint
- Chronic pain for at least 3 months or lasting less than 3 months for patient experiencing complex severe acute pain, suspected neuropathic pain or complex pain medication wean/titration
- Investigations to identify etiology of pain have been completed
- Pain refractory to traditional management strategies (commonly used analgesics, physical or psychological therapies)
- Chronic pain significantly impacts activities of daily living (school attendance, sleep, mood, quality of life and/ or family functioning)
- Primary/referring physician agrees to collaborate in ongoing pain management follow-up including writing medication prescriptions when indicated and transition planning

## **Exclusion criteria**

- Conversion Disorder where pain is not the primary complaint
- Active eating disorder treatment
- Headache as primary pain complaint (please refer to Headache Clinic)

## Patient groups/conditions accepted

- Gastro-intestinal pain
  - Recurrent abdominal pain, abdominal pain related to genital/urinary, gynecological, post-surgical or gastroenterological disease
- Central nervous system pain
  - o Neuropathic pain Phantom limb, post-trauma, trigeminal neuralgia
  - Complex regional pain syndromes
- Musculoskeletal pain
  - o Back pain
  - Post-infectious, post-surgical, post-traumatic, idiopathic musculoskeletal pain
  - o Fibromyalgia
- Recurrent or chronic pain related to congenital disorders