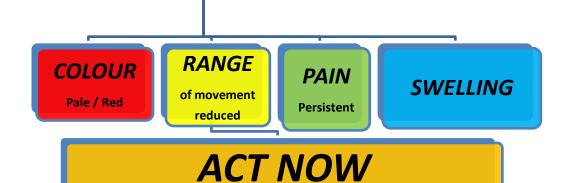
COMPLEX REGIONAL PAIN SYNDROME (CRPS) **SCREENING**

Does your patient have the following features?



Speak with attending Consultant / Senior Clinical Decision Maker

Query / Risk of CRPS

- 1. Start Lyrica low dose 25mg BD 1/52. Titrate to 50mg BD, 75mg BD x2/3 day. Max dose 150mg BD. Vit. C Supplement 500mg OD, for 50 days is recommended. Healthy diet. G.P. to monitor pain meds.
- 2. Refer to Physiotherapy & Occupational Therapy (HEP & advice in/out of POP) in POP
- 3. Orthopaedic Consultant to review re: further immobilisation plan / K-wire removal
- 4. Follow-up promptly in Fracture clinic as appropriate

Definite CRPS

- 1. Start lyrica low dose (G.P. to monitor pain meds until Dr. Wei Lan Consultant Pain **Specialist and Clinical Lead CRPS Forum** review)
- 2. Refer to Physiotherapy & Occupational therapy (HEP & advice in/out of POP)
- 3. Refer to Dr. Wei Lan, Pain Management, SIVUH
- **4. Orthopaedic Consultant** to review immobilisation period/plan for K-wire removal
- 5. Follow up promptly in Fracture Clinic as appropriate