

Separating Chronic Pain and Red Flags

A Quick-Reference Tool to Guide Your Next Move in Rehab Planning



Helping you plan **smarter,** **more effective** rehab strategies

In the world of rehabilitation, not all pain points in the same direction. Some clients are living with the type of chronic pain that responds to education, movement and gradual exposure. Others may be dealing with symptoms that suggest something more serious, something that can't be resolved through conservative means and actually may need urgent medical attention.

The trick is knowing the difference and this resource is here to help.

Whether you're a case manager reviewing a claim, a rehab provider building a return-to-work plan or a treating professional trying to decide if now is the time to escalate, this table gives you a fast, structured way to compare pain presentations and choose the right course of action.

A pause at the right time can save weeks, sometimes months, of rehab delays, not to mention avoid unnecessary risk.



How to Use This Resource

When you're faced with a client in pain and you're unsure whether conservative rehab should continue or be paused, use this table as a quick guide.

Start by thinking about the client's overall presentation:

- How long have they been in pain?
- What are they reporting?
- What patterns have emerged?
- Then, go through each row in the table and ask: "Which column does this client's story align with?" You might even find it helpful to print this out and literally tick the boxes.

It's not a diagnostic tool, but it will give you a clear snapshot, so you can act faster and with more confidence.

If the picture looks more like a Chronic Pain pattern → continue with confidence with conservative management.

If Red Flags are present → pause and strongly consider a medical review.



Chronic Pain vs Red Flag Checklist

Feature	Chronic Pain Pattern	Red Flag Warning Signs
PAIN DURATION	Pain >12 weeks, lingering post-injury	New pain or pain that's changing or worsening quickly
PAIN LOCATION	Vague, diffuse, may move around	Sharp, specific or linked with other worrying symptoms
WHAT MAKES IT WORSE	Stress, over/under activity, mood fluctuations	Nothing helps – pain is constant or intensifying
NEUROLOGICAL SIGNS	Tingling or mild sensitivity only	Weakness, numbness, bladder/bowel issues
NIGHT PAIN	May exist but eases with position or movement	Severe, persistent, disrupts sleep regardless of movement
OTHER HEALTH CLUES	Fatigue, low mood, poor sleep	Weight loss, fever, recent infection or cancer/inflammatory history
RESPONSE TO REHAB	Improves with pacing, education, graded activity	No improvement or worsens despite appropriate input

If 2 or more red flag warning signs are present → Pause rehab and consider medical re-evaluation

Recognising when pain no longer fits the typical chronic pattern isn't just good clinical sense, it's essential for protecting the client. Pushing forward with rehab in the presence of red flags can delay critical diagnoses, worsen underlying conditions and in some cases, miss the early signs of serious or even life-threatening issues.

The earlier these warning signs are identified, the better the chance of timely intervention, clear diagnosis and a safe return to function. Requesting that the GP reassess can ultimately save time, reduce costs and most importantly, ensure that your client gets the right support at the right time.