Ways to control your pain

Analgesics and anti-inflammatory drugs, Acetaminophen, aspirin, ibuprofen and other medications can reduce swelling and soreness and relieve mild to moderate pain. These medicines may be combined with others for improved pain control.

Local anesthetics

Similar to Novocain, these medications are used during certain types of surgery to block the nerves that transmit pain signals. They are given either near the incision or through a small tube in your back. Local anesthetics seldom cause drowsiness or constipation and they may reduce the need for opioid use.

Opioids

Morphine, codeine and other opioids are most often used for acute discomfort such as short-term pain after surgery. These medications may cause drowsiness, nausea or constipation. Short-term use for acute pain relief rarely results in addiction.

ALTERNATIVES FOR MILD TO MODERATE PAIN CAN HELP BOOST THE PAIN-RELIEF EFFECTS OF DRUGS:

 $\frac{\text{PATIENT EDUCATION}}{\text{operation and what to expect helps reduce}} \sim \text{learning about the}$ operation and what to expect helps reduce anxiety.}

<u>RELAXATION</u> ~ simple exercises suggested by your caregiver can increase comfort.

<u>MUSIC</u> ~ music can provide relaxation and distraction.

<u>PHYSICAL AGENTS</u> ~ heat or cold therapy, massage, healing touch, rest and good body alignment can lessen pain.

Methods used to give pain-relief medicines

Tablets or liquid

Medicine taken by mouth causes less discomfort than injections and can work just as well.

Injections into the skin

Medicine given by injection into skin or muscle is effective even if you are nauseated/vomiting.

Injections into the vein

Medicine is injected into the vein through a small tube called an intravenous (IV) catheter. Medicines given this way act quickly. Patient controlled analgesia, or PCA, allows you to control your own IV pain medicine with the push of a button within pre-set limits established by a physician. Your caregiver can give you more details.

Other options

Alternate forms of pain control are available, depending on your surgical procedure. Your surgeon or anesthesiologist will decide which type is most appropriate for you.

How to keep your pain under control

Being prepared helps put you in control. Ask the Doctor or nurse what to expect. You might like to know how:

- Will I have much pain after surgery?
- Where will it occur and for how long?

Discuss pain control options with your doctor and nurse

- Methods that have worked well in the past.
- Concerns about taking pain medicine.
- Report any drug allergies you have.
- Side effects
- Taking pain medication at set times instead of waiting until the pain breaks through often has better results.

Your doctor/nurse will work with you to design the best pain management plan for your needs.

Pain control after surgery

Take (or ask for) pain relief medication when the pain first begins.

- Take action as soon as the pain starts.
- If you know your pain will worsen when you start walking or doing exercises, take the pain medicine first. Pain is harder to manage once it has taken hold. This is a key step in proper pain control.

Help doctors and nurses "measure" your pain.

- You will be asked to rate your pain on a scale of 0 to 10. Zero is equal to "no pain" and 10 is equal to "the worst possible pain." Reporting your pain in this way helps the doctors and nurses know how well your treatment is working and whether to make any changes.
- You will also set a pain control goal, such as "having no pain that is worse than 2 on the scale."

Tell the doctor or nurse about any pain that will not go away.

- Increased pain, or pain that is unrelieved by medication, should be reported.
- Do not worry about being a "bother." The nurses and doctors want and need to know if you are feeling pain.

As our patient you should expect:

- Your reports of pain will be believed
- Information about pain and pain relief measures
- Health professionals who respond quickly to reports of pain
- Effective pain management
- To participate in decisions regarding pain control options

Recovering After Surgery/ Managing Surgical Pain



Connecticut Orthopaedic Surgery Center

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PHYSICIAN OWNERSHIP
See website for physician ownership www.ctorthosc.com

RECOVERING AFTER SURGERY



INCISION CARE

You may leave the center or surgery center with a bandage or dressing. Your doctor will tell you when to remove it. Keep the dressing clean and dry. A small amount of bleeding and leakage from the incision is normal. However, if the bandage soaks through, call your doctor. Your written instructions will indicate when you can shower or take a bath.

Recovering At Home

Your recovery after surgery continues at home. To feel better faster, follow the instructions given to you by the nurse and the written instructions provided by your Doctor.

For at least 24 hours while you recover from the anesthesia:

- Do not drive or operate hazardous machinery
- Do not drink alcohol
- Do not make important personal or business decisions

For the first day or two, as necessary, have someone available who can help you and watch for problems. Make sure this person has reviewed your written instructions.

SIGNS AND SYMPTOMS TO REPORT TO YOUR DOCTOR

- Unusual, unrelieved or severe pain
- Chest pain and/or shortness of breath
- Continued nausea and/or vomiting
- Large amount of bleeding
- Inability to urinate
- Increased swelling or redness at or near the procedure site
- Red, hard, or painful area around the incision or on your legs
- Fever over 101° F

EATING OR DRINKING

Your stomach may be upset and you may become constipated. This is often caused by the surgical procedure, anesthesia, or by certain pain medications. You may not feel like eating much. Start off with liquids and light foods (Jell-O, soup, etc.). Slowly progress to solid food. Avoid fatty, rich or spicy foods during this time.

Unless you are advised otherwise, drink as much water or liquids (apple juice, ginger ale, etc.) as you can tolerate.

ACTIVITY

Being active will help you heal. Heavy lifting and strenuous activity should be avoided until your doctor tells you it is time to resume normal activity. Follow your doctor's instructions about any restrictions indicated for your particular surgical procedure. If you have any questions, call your doctor for clarification.

MEDICATION

Take pain medication as directed by your Physician or nurse. Do not let the pain become very bad before taking it.

- If the medication does not work, call your surgeon.
- If the pain gets worse, call your surgeon.

FOLLOW-UP PHONE CALL

A nurse will call you within 72 hours after surgery to check on how you are feeling and to answer your questions. Be sure to mention any problems you may be having. It is important to use this opportunity to let your caregivers know how you feel about your experience, so they may provide the best care possible. For surgeries performed on Friday, a call will be placed on the following Monday.

Remember to schedule your postoperative visit with your doctor.

MANAGING SURGICAL PAIN



Your Role is Important!

People used to think that severe pain after surgery was something they "had to put up with." But with current treatments that's no longer true. Today you can work with your nurses and doctors before and after surgery to prevent or relieve pain and discomfort.

This guide to pain management will explain the goals of pain control and the types of treatment you may receive. It contains tips on how to work with your doctors and nurses to get the best pain control, information on why pain control is important for your recovery as well as your comfort, and suggestions on how to play an active role in choosing pain treatment.

Pain control after surgery can help you:

- Enjoy greater comfort while you heal
- Start walking, do you're breathing exercises and regain your strength more quickly so you get well faster
- Avoid complications, such as pneumonia and blood clots