Managing Your Pain after a Medical Procedure





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WHAT CAUSES PAIN AFTER A MEDICAL PROCEDURE

Many factors can contribute to the pain you feel. These can include:

- A surgical cut
- Muscle spasms or cramps near the site of the procedure
- Tubes inserted into the body during or remaining after the procedure
- Muscle pain as a result of the position you had to lie in during the procedure, or lying in bed for a long time after the procedure
- Air or blood in the gut or chest, which is sometimes felt in places far from the site of the procedure
- Constipation

It was once thought that pain after a medical procedure was something you just had to expect, and "toughing it out" was a sign of strength. Healthcare providers don't see it that way anymore. While pain is expected and normal after some procedures, the treatments available today mean that most



people don't have to put up with severe pain. Healthcare providers specializing in pain management can help you control or relieve your pain. In fact, research has shown that managing your pain well helps you heal faster.

Read this information to learn more about your pain management options. Let your healthcare providers know what hurts, and how much it hurts. As you and your healthcare providers work together, you can find the most effective treatment with the fewest side effects.

Why pain management is important

Managing your pain makes you feel more comfortable, and it does a lot more than that. Good pain management allows both your mind and body to focus on healing — and healing faster can help prevent complications. As you and your healthcare providers manage your pain, expect that:

- You'll feel less stress. Feeling comfortable reduces the stress that comes with pain. Less stress means your mind and body can both work harder on healing.
- You'll be able to move around more easily. If you feel less pain, it's easier to do the physical therapy and breathing exercises that will get your strength back more quickly. You may even leave the hospital sooner.
- You may have fewer complications after your procedure. People whose pain is well controlled seem to do better after procedures. For example, they don't have as many problems such as pneumonia or blood clots.



STAY AHEAD OF THE PAIN

As soon as you start to feel pain, let your healthcare providers know. It's easier to control the pain before it gets too strong. If you wait until it's severe, it may be harder to get under control.

Communicating with your healthcare providers

To treat your pain, your healthcare providers need to know what's happening in your body. This is the role you play in your care. Your most important job is to let them know how you feel. Don't worry about being a bother! Knowing how you feel is the only way your healthcare providers can help you feel better. If the pain can't be controlled or it gets worse, it may be a sign of a complication that the doctor needs to know about. The ideas below will help you tell your healthcare providers how you feel.

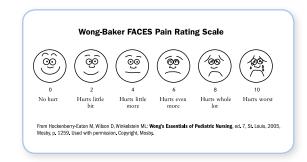
Rating your pain

It's not always easy to describe pain. A **pain rating scale** is a tool to help you describe how much pain you're feeling. It should give your providers a clearer understanding of how you feel. Use one of the scales below to help you rate your pain.



A score of 0 means you feel no pain. A 10 means it's the worst pain you can imagine.

Your healthcare providers can use these numbers to see how your pain is changing over time and whether treatment is having the intended effect.



Describing your pain

In addition to knowing **how much** pain you feel, it also helps to know **what kind** of pain you feel. Again, don't worry about being a bother. The more your providers know about your pain, the better they'll be able to treat it. They need to know these things about your pain:

- Where does it hurt? It hurts in my: shoulder, hip, knee, etc.
- When does it hurt? It comes and goes, or, It hurts all the time.
- What does it feel like? It feels sharp, dull, aching, throbbing, like pins and needles, etc.
- What makes it feel worse? It feels worse when I stand, sit, lie down, walk, sleep, eat, read, get dressed, etc.
- What makes it feel better? It feels better when I stand, sit, lie down, walk, sleep, eat, read, etc.

What can I expect?

The pain is usually worst in the first two days after a procedure. After that, it should begin to decrease. Expect that your healthcare providers will try to keep you comfortable all the way through.

How much pain medication will I need?

Everyone handles pain differently. Some people can tolerate a higher level of pain than others. Your healthcare providers will work with you to find the right amount and combination of medications, and decide how long you should take them.

What is my pain management goal?

Successful pain management may not take away all of your pain. The goal is to reduce or control your pain enough that you can rest and do the activities that will help you recover. To help make the best plan for your care, your healthcare providers will consider three factors:

- What recovery activities do you need to do? These may include coughing or breathing deeply to prevent complications, or physical therapy exercises.
- How much pain would still allow you to do these activities? You and your healthcare providers will use the methods described on page 2 to rate your pain. They'll help you identify the level of pain you could manage and still do your recovery activities. Everyone's ability to tolerate pain is different. Many feel that their pain needs to be no higher than 3 or 4 to do their recovery activities.
- What would be comforting to you? When you're uncomfortable, your pain can feel even worse. Your healthcare providers can help you identify what you need to be comfortable. This can include listening to music, staying warm, sleeping without interruption, or quickly managing feelings of nausea.

Once you've identified these things, your healthcare providers will use them to help determine your best level of pain control. **This is your pain management goal.**

What if my pain isn't controlled?

Sometimes finding the right pain management is difficult. It may take a few tries to find the greatest pain relief with the fewest side effects and risks. If your medication is not controlling your pain, tell your healthcare providers. They may try to find another method of pain management or may request the advice of a pain specialist.

Can I get addicted?

When used for pain and under the care of a trained healthcare provider, prescribed pain medications pose very little risk of addiction. If you've had an addiction in the past, make sure your healthcare providers know about it. Knowing your experience will help them manage your medications better and keep you safer during treatment.

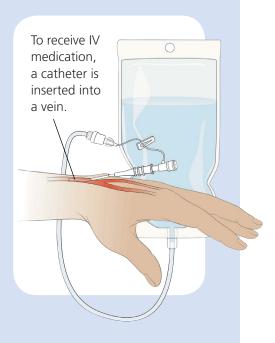


WHAT WILL IT FEEL LIKE WHEN IT WEARS OFF?

When your local anesthesia or epidural begins to wear off, you may feel a tingling or burning. The feeling in the part of your body that was numbed will start to return. If your doctor has given you pain pills in addition to your other pain medication, take a dose of them right away as prescribed, before the pain gets too bad.



Both pain pills and IV medication relieve pain throughout your whole body. The shading shows where the pain is relieved.



What are my options?

There are many methods of relieving pain. You may receive pain pills or a shot into a muscle or a vein. You may have a small tube, called a **catheter**, that can deliver the medication into a vein continually.

Which method works best for you depends on the procedure you've had, your medical condition, and your past experiences with pain management. You and your healthcare providers will make this decision. If it doesn't work well enough, they may make changes. You may also be given a different pain treatment as you heal and your pain decreases.

Your pain medication can be delivered in the following ways:

Pain pills

Pain pills deliver medication to your entire body. Pain pills are often given after minor surgery or after pain has been initially treated with another method. They may also be given in addition to another method. If you've been given pain pills, you can write the names of them on the lines below. Ask your doctor before taking ANY other pills.

IV pain medication

IV stands for "intravenous," which means "into the vein." An IV is a catheter inserted directly into a vein. It can also be given as a shot into the vein. It's used to deliver pain medication throughout your body. The catheter stays in your vein all the time the medication is being used. Medication given this way goes through your body fast, so it starts to work quickly.

IV pain medications have these potential:

Benefits

- Starts to relieve pain quickly
- Allows you to walk sooner after surgery

Risks and Complications

- Nausea or vomiting
- Sleepiness
- · Decreased breathing
- Itchina
- Mental cloudiness
- Constipation
- Trouble urinating (peeing)
- Death (extremely rare)

Local anesthetics

A local anesthetic blocks pain signals in a specific area of your body. It is usually given as a shot or through a catheter. It's given in the skin or muscle around your incision, into a joint, or around specific nerves. Local anesthetics numb only the targeted area, so you can remain awake and alert. Local anesthetics can be used before, during, or after a procedure.

Local anesthetics have these potential:

Benefits

 Since the medications only affect a targeted area and are not carried in your bloodstream, local anesthetics are usually very safe and have few side effects

Risks and Complications

- In rare cases, these medications could be absorbed through the bloodstream and affect your breathing, heartbeat, blood pressure, and other functions
- The injection site may be painful for a short time
- Bleeding
- Bruising
- Infection
- Nerve damage (very rare)

Epidural

An epidural is a procedure to block pain in the hips, knees, pelvis, chest, or abdomen. A doctor injects pain medication into the epidural space that surrounds your spinal cord. It can be delivered through a catheter or as a shot.

You can remain awake and able to move with an epidural. Depending on the amount of pain medication you receive, you may still feel motion, warmth, and cold in your legs, or your legs may feel numb. You should still be able to walk. The medication should reduce your pain enough that you can do normal activities.

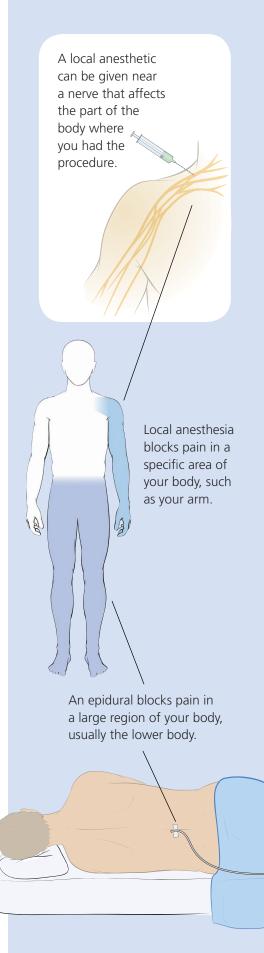
Epidural anesthetics have these potential:

Benefits

- Reduces "breakthrough" pain
- Causes less anxiety
- Allows you to remain awake
- Allows you to walk sooner after surgery

Risks and Complications

- Severe headache
- Bleeding
- Drop in blood pressure
- Numbness
- Nerve damage
- Allergic reaction to anesthesia
- Spinal cord injury
- Infection
- · Decreased breathing
- Trouble urinating (peeing)
- Itching
- Retained catheter
- Death (extremely rare)



Patient-controlled analgesia (PCA)

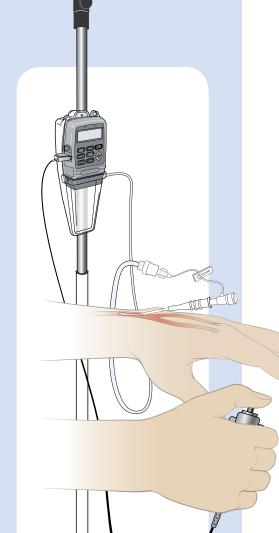
You're in control

If you're given a local anesthetic, an epidural, or an IV through a catheter, you may also be given a **PCA pump**. PCA stands for **patient-controlled analgesia**, which means that you decide when you get another dose of medication.

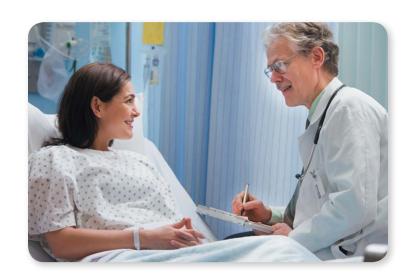
Here's how it works:

- **1** A needle is used to insert a catheter (tiny tube) into your skin or vein. The needle is then removed and the catheter remains.
- **2** The catheter is attached to a supply of pain medication and to a pump that delivers the medication.
- **3** The pump has a button that you can push as soon as you need more pain medication. You don't have to wait for a doctor or nurse to give it to you.
- **4** No one but you should ever push the PCA button.

PCA is safe. For your safety, the pump is set with a "lock out" time limit. That means if you ask for a dose too soon, the pump won't give it to you. This will help prevent an overdose of your medication.



With PCA, you'll feel less anxiety because **you** control when you get the next dose.



Managing your pain at home

Once you're well enough to leave the hospital, managing your pain is still important. Keep it under control, and you'll get better faster.

Pain relief medication

You may be sent home with one of these:

- **Prescription or non-prescription pain pills.** If so, take them just as your doctor directed. When taken as directed, there's very little risk of addiction. If your procedure is done on or near a weekend, be sure to fill your prescriptions before you leave the facility. Get a phone number where your doctor can be reached after business hours.
- More than one kind of medication. Pain medication, anti-inflammatory
 medication, and muscle relaxants control pain in different ways. You
 may need to take them on different schedules. Follow your doctor's
 instructions carefully.
- A LAID (local anesthetic infusion device) is set up by your healthcare providers to deliver pain medication through a catheter. They will tell you how to care for it and when to remove it. Don't cover it with a cold pack.
- A PCA (patient-controlled analgesia) pump. If you have a PCA pump, remember that no one but you should push the pain button.

Whatever the pain medication, **take it right on schedule**. If you don't, you may start to feel pain. After the first few days, you may be able to wait longer between doses. Eventually you won't need pain medication anymore. But at first, stay on schedule.

Pain relief without medication

Taking your medication as directed is an important part of your pain control. But there are other things you can do, too. These don't replace your medication, but they can help manage the pain.

Relax. Try to focus on breathing slowly and rhythmically. Try rubbing or massaging the painful area.

Apply cold or heat to your pain. Your healthcare providers can help you decide when to try heat and when to try cold.

Elevate the limb. If your procedure was on your arm or leg, prop up the limb above the level of your heart. Or try to change positions until you feel more comfortable.

Distract yourself. Listen to music, watch television, or visit with a friend. Find spiritual or psychological support. Talk with a friend or counselor or turn to your spiritual foundations.

Consider alternative therapies. Some people find relief through alternatives such as acupuncture or acupressure.



IMPORTANT REMINDERS ABOUT YOUR PAIN MEDICATIONS

- Take them EXACTLY as your doctor ordered.
- NEVER take medications more often than your doctor ordered.
- NEVER take other medications (not even Tylenol) or drink alcohol without your doctor's permission.
- NEVER take illicit, illegal, or recreational drugs while taking pain medication.
- Only take medications that were prescribed for YOU.
- Dispose of any unused pain medication properly. You can find information on medicationdisposal.utah.gov, or your healthcare providers can explain how.

Not following these instructions could cause very serious problems or death.

What should I report to my doctor?

If you experience any of the following, contact your doctor right away:

- Increase in pain, or pain that you can't tolerate
- Numbness, tingling, or weakness in your arms or legs
- Weakness, numbness, or tingling where you don't expect it
- Not having a bowel movement
- Itching
- Dizziness, light headedness, or fainting
- Redness, swelling, or drainage around the catheter
- Fever

- Shortness of breath
- Chest pain
- Skin rash
- A ringing, buzzing, or whistling sound in your ears
- A metallic taste in your mouth, or numbness or tingling around your mouth and lips
- Coolness, tightness, or pain around your incision
- Blurred vision
- Persistent headache



As you read this information, you may have questions for your healthcare providers. Write them here.	

