



Managing pain is easier when we talk about it as a care team; patient, nurse, physician, nurse practitioners and physician assistants.

### **BEFORE SURGERY:**

We will discuss pain management with you before your surgical procedure. Please don't hesitate to ask us questions. We should discuss things like:

- Allergies to medication you may have
- How your pain will be treated
- Possible side effects from the pain medication
- Medications that have worked well to control your pain in the past
- Ways to control pain other than medications

### AFTER SURGERY:

If you are in pain after surgery, tell us right away; don't hesitate. Pain is a normal part of healing and the sooner you tell us, the faster we can begin to manage it for you. It may not be possible to get rid of all your pain after surgery, but we can control it. Also, please tell us if you think you are experiencing side effects from the pain medication so we can help to manage that as well.

You can help us to manage your pain by telling us:

Where it hurts

- How much it hurts (on a scale of 1 to 10, 10 being the worst)
- If you think the pain medication isn't working

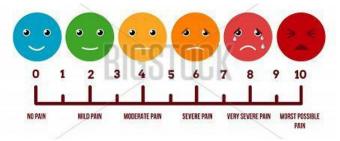
As part of pain management, we will discuss pain medication options and other pain control methods with you. For example, we may be able to relieve some of your pain by changing your position in bed or raising your arms and/or legs.



# IMPORTANT WORDS TO USE TO DESCRIBE YOUR PAIN

It can be difficult to describe pain accurately but the better you can describe the pain the better we can manage it. Here are some words that may help describe what you are feeling:

- Aching
- Cold
- Blunt
- Sore
- Dull
- Off and on
- Nagging
- Pins and needles
- Stinging
- Constant
- Biting
- Burning
- Hot Cutting
- Spreading from one place to another
- Making me sick to my stomach
- Intense
- Piercing
- Sharp
- Shooting
- Stabbing
- Throbbing



#### **HOW WE MEASURE PAIN**

An important part of managing your pain after surgery is understanding the amount of pain you are experiencing. Your care team will create a pain management plan based on the type of surgery you had, expected recovery time, and the level of pain you are experiencing. You play an important role in this process.

Doctors, nurses, nurse practitioners, and/or physician assistants may ask you to rate your pain on a scale from 1 to 10, ten being the highest. They may show you a pain scale with these numbers, or pictures. The more you can help us understand your level of pain, the more we can help to manage it.



### MULTIMODAL PAIN CONTROL

You may be given several different types of medication to control your pain. It's called multimodal pain control and has several goals:

- Reduce the strongest (most acute) pain you are apt to feel after surgery
- 2. Reduce the side effects from pain medication

Multimodal pain control may include the following steps:

- 1: Non-opioid pain relievers may be prescribed after surgery, including medications like ibuprofen and acetaminophen
- 2: Opioids like morphine may be added if pain continues and/or worsens
- 3: If the pain continues to get worse, the dosage of the opioid may be increased

Pain medication is delivered in several different ways:

- 1.Intravenous line (IV) immediately after surgery
- 2. Oral medication (taken by mouth)



# WHAT TO DO IF YOU HAVE MEDICATION SIDE EFFECTS

Some people suffer side effects from pain medication, especially opioids. The most common are:

- Sleepiness
- Dizziness
- Feeling nauseous
- Vomiting
- Confusion
- Constipation

If you suffer any of these side effects while in the hospital or at home, tell your doctor. Some of these may be serious if they continue untreated.

#### YOUR RECOVERY

A plan for your recovery is just as important as managing your pain. Your care team will discuss these goals with you and help you to begin achieving them even before you leave the hospital. Your pain will be managed while you take these small steps that can reap big benefits in helping you recover from surgery faster. They include:

- Turning over in bed
- Coughing and breathing deeply
- Sitting up in bed
- Moving to a chair from the bed
- Walking the distances recommended by your team
- Exercises designed to prevent blood clots, (deep vein thrombosis [DVT]) recommended by your team





### MANAGING YOUR PAIN AT HOME

Before you leave the hospital, we will discuss ways for you to manage your pain at home. It may involve taking different types of pain medications.

We will give you detailed instructions on the dose and timing of each medication. It is very important to follow these directions carefully to make sure the medication works properly.

We will also give you instructions on how to store the medication properly.

If you have any concerns, please discuss them with us. Please ask us any questions you may have about the risks of taking these medications and any potential side effects.

Make sure to follow your doctor's directions about how to take the medication, for example whether to take it with food, a full glass of water etc. This can help to avoid some side effects like an upset stomach and constipation.

### WHAT TO DO IF YOUR PAIN GETS WORSE

Once you begin to return to your normal daily activities you may notice that your pain seems worse. This can happen when the local anesthesia wears off. You may experience increased pain when:

- Pain medication begins to wear off between doses
- You walk, move suddenly, or cough
- You renew daily activities like bending

If you have questions, call your primary care physician and describe the pain, when it occurs, and how it rates on the 1 to 10 scale (page 4).





# MANAGING PAIN WITHOUT DRUGS

Some people find it helpful to use these strategies to enhance pain management, with or without pain medications. Ask your care team how these may help you.

- Meditation and mindfulness
- Controlled breathing and relaxation techniques
- Listening to calm, soothing music
- Changing your position
- Elevating your arms and/or legs
- Increasing your activity level
- Certain types of moderate stretching



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