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اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید۔

ने उदाहृत उदाहरणों में लैज़र है जं विवरण करके इस नंबर से बोलें करें: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

Se precisa de uma tradução por favor contacte: 01932 723553

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553

यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

Ashford Hospital
London Road
Ashford, Middlesex
TW15 3AA
Tel: **01784 884488**

St. Peter's Hospital
Guildford Road
Chertsey, Surrey
KT16 0PZ.
Tel: **01932 872000**

Website: www.ashfordstpeters.nhs.uk

Post Operative Pain Relief

Acute Pain Service

Post Operative Pain Relief

Introduction

Following your operation you will be given pain relief.

The method by which pain relief is used will depend on the type of surgery you have had.

Your anaesthetist will discuss with you the way in which your pain relief will be administered.

How is pain controlled in hospital?

During the operation, whilst you are asleep, the anaesthetist will not only be giving you pain relief but also organising how your pain will be controlled when you wake up after your operation.

Are there any alternatives?

Various ways of controlling pain are available; these are explained in this leaflet with reference also to any risk or benefits applicable.

Tablets

The simplest way of taking painkillers is in tablet form. Tablets may be used on their own or with other methods of pain relief, such as patient controlled analgesia or an epidural (see below).

As it is easier to prevent pain, rather than having to treat it when it occurs, it is recommended that painkilling tablets are taken regularly, as prescribed.

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Advice and Liaison Service (PALS) on 01932 723553 or email pals@asph.nhs.uk. If you still remain concerned please contact our Complaints Manager on 01932 722612 or email complaints@asph.nhs.uk

Sometimes this may be irritating, even interfering with your sleep. Please understand that, in the interests of your safety, the nurses **have to carry out** these observations.

Local Anaesthetic Infusions - If your anaesthetist suggests or advises this method of pain relief there is a separate patient information leaflet available.

Contact Details

The Acute Pain Service is a team of doctors and nurses who work alongside your doctors and nurses in hospital. Our aim is to help ensure that any pain you experience following your operation is minimised as much as possible.

If you have any questions or concerns about pain relief after your operation, and you would like to discuss these, please contact the Acute Pain Service. We are available:

Monday to Friday between 08.00 and 17.00 hours

Sharon Kitcatt - Consultant Nurse Acute Pain Service

Harriet Barker - Specialist Nurse Acute Pain Service

Victoria Woolger – Specialist Nurse Acute Pain Service

telephone **01932 872000** ask for **bleep 5042**

For additional information about postoperative pain, please log on to www.youranaesthetic.info

It is important that you continue to take your medication, even if you are not in pain. This way, you keep up levels of painkiller in your system, making the pain easier to control.

If you wait for pain to get bad then the tablets may not be as effective.

Injections

Frequently, after an operation, strong painkilling drugs are given by injection into a muscle. As there is a limit to how often these drugs can be administered, you may find the pain returns before the next injection is due. If this happens, please tell the nurse.

Patient Controlled Analgesia (PCA)

Patient Controlled Analgesia (PCA) allows you to give the appropriate amount of pain relief according to your needs. With PCA, we give you a pump that contains painkiller that, in turn, is connected to your 'drip' (intravenous infusion).

Attached to the pump is an electronic button that you keep with you all the time. When the pump is ready to deliver some painkiller the button lights up. If you press the button, when it is lit, a small dose of painkiller will be pushed through the drip into your bloodstream. You cannot overdose yourself, as the pump is pre-programmed.

If you do not press the button, you will not get any painkiller. We advise you to press the button when you feel the pain is starting to build up as, if you keep ahead of the pain, it will be easier to manage.

Nursing staff on the ward can advise you on using PCA and they will help you to get the maximum benefit.

It is advisable to press the button before any type of activity, including any physiotherapy exercises.

Risks associated with PCA

- The painkillers used in PCA are called opioids. They can sometimes make you feel sick. If this occurs you will be given an anti-sickness (anti-emetic) drug so that you can carry on using the PCA
- Occasionally people experience itching. An antihistamine can be given if necessary
- Opioids can cause drowsiness. Very occasionally, they can slow your breathing down. The nurses will monitor you closely to prevent this happening
- If you fall asleep, you will not be pressing the button to your pump so you may wake up with some pain. Once you are able to drink, you will be given painkilling tablets to take whilst you have the PCA. It is important that you take these tablets as they will help the PCA work better and assist your pain whilst you are asleep.

Benefits associated with PCA

If you are in control of your painkiller then you should be able to give yourself just enough to keep comfortable. This means that you may use less strong painkiller and you should have fewer side effects.

Epidurals

Epidurals are frequently used for pain relief in childbirth. An epidural is also an effective way of giving pain relief after an operation.

Your backbone is a set of bones, one on top of the other. Down the middle runs a canal, inside this canal is a bag of fluid containing the spinal cord. This bag is called the **dura**.

The space outside the dura, but still inside the bony canal, is called the **epidural space**. It is into this space that we thread a small plastic tube so that we can steadily trickle in some painkiller to give you continuous pain relief. The epidural will cause you to feel numb around the area of your operation but generally, you will be able to move around easily.

Your anaesthetist will explain the risks and benefits, but for additional information regarding epidurals, including risks and benefits you may log on to www.youranaesthetic.info/epidural/

Oxygen Therapy

Occasionally oxygen levels in the blood may fall after an operation and you may be given oxygen through a mask or a tube in your nostrils.

Do not hesitate to ask a member of staff if you need advice.

Observations

During the post-operative period, the nurses will keep you under close observation, which includes checking your blood pressure, heart rate etc.