

## CAN WE MAKE YOUR VISIT EASIER?

... putting people at the heart of everything we do ...

We want to make your visit to Ashford and St. Peter's Hospitals easier. Some things we can provide quickly, others may take time to arrange. Whatever your need – please ask for help.

We can provide interpreters for a variety of languages, information in larger print or Braille, plus audio and other formats.

If you require a translation please call: 01932 723553

اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723 553 تماس بگیرید۔ Farsi

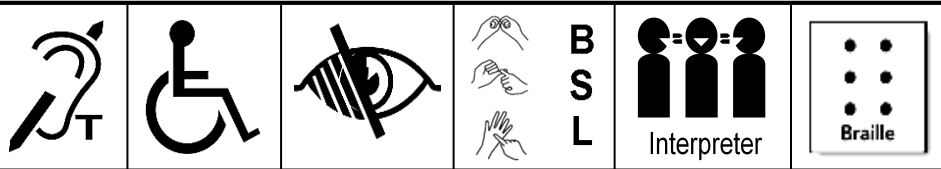
ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ ਫੋਨ ਕਰੋ: 01932 723553 Punjabi

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723 553 پر رابطہ کریں Urdu

Se precisa de uma tradução por favor contacte: 01932 723553 Portuguese

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

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553 Bengali



## POST OPERATIVE PAIN RELIEF

### Acute Pain Service

Ashford Hospital, London Road, Ashford, Middlesex, TW15 3AA.

Telephone: 01784 884488 Fax: 01784 884017

St. Peter's Hospital, Guildford Road, Chertsey, Surrey, KT16 0PZ.

Page 12 Telephone: 01932 872000 Fax: 01932 874757

Website: [www.ashfordstpeters.nhs.uk](http://www.ashfordstpeters.nhs.uk)

## PATIENT INFORMATION



## 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.

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.

## FURTHER INFORMATION

Details regarding our hospitals, including information regarding the Department caring for you can be found by logging on to our website [www.ashfordstpeters.nhs.uk](http://www.ashfordstpeters.nhs.uk) or the National NHS website [www.nhs.uk](http://www.nhs.uk) which includes an A to Z guide to health.

Our staff endeavour to provide an excellent service but we do recognise that there are times when you may have concerns. In the first instance please raise these with the Senior Nurse or Manager in charge when you are at the hospital. If they are unable to resolve your query satisfactorily please contact our Patient Advice and Liaison Service (PALS) on 01932 723 553 or e-mail [www.pals@asph.nhs.uk](mailto:www.pals@asph.nhs.uk).

Having done this, if you remain concerned our Complaints Manager can be contacted on 01932 722 612 or e-mail [www.complaints@asph.nhs.uk](mailto:www.complaints@asph.nhs.uk)

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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](http://www.youranaesthetic.info)

## 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/](http://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.