Ambulatory Surgery
Post-Operative Pain Management
Discharge Instructions

Information provided by the Pain Management Service,
Department of Anesthesiology, HSS
After Surgery

After your surgery, post-surgical discomfort or pain is likely. This discomfort can last several days to a few weeks. At certain times of the day your discomfort may be more intense, specifically after physical therapy or rehabilitation. Although post-surgical pain or discomfort is a normal part of the healing process, severe pain or discomfort is not. After taking your pain medication, if you experience severe pain or discomfort, you should immediately contact your surgeon’s office. If you are unable to contact a physician at your surgeon’s office and you feel that you need immediate attention, please go to the nearest emergency room for evaluation.

During your surgery, the anesthesiologist may have given you a nerve block. This nerve block was performed to numb the area that your surgeon was operating on and provide you temporary pain relief after surgery. A nerve block can provide pain relief from one hour to two days after your surgery. As long as the nerve block is working, you will experience little or no sensation in the area the surgeon operated on. However, as the nerve block wears off, you may begin to experience pain or discomfort.

It is very important that you begin taking your prescribed pain medication before the nerve fully wears off. Treating your pain at the first sign of the block wearing off will ensure your pain is better controlled and more tolerable when full-sensation returns.

If you did not receive a nerve block during your surgery, you will have started taking your pain pills shortly after your surgery and should continue to do so as prescribed by your surgeon.
Treating Pain: Common Pain Medications

It is vital that you only take your pain medication as directed by your healthcare provider.
The most commonly prescribed pain medications after surgery are Vicodin (Norco) and Percocet. Both of these medications contain a combination of acetaminophen (Tylenol®) and a narcotic to help control pain.

- Your surgeon will prescribe your medication and will direct you as to how frequently you can take it. Typically, the direction is to take 1 to 2 pills every 4 to 6 hours as needed.
- If you routinely need to take your pain medication before the 4 to 6 hour interval, contact your surgeon or internist as a different pain medication may need to be prescribed.
- It generally takes between 30 and 45 minutes before pain medication starts to work. It is important to take your medication before your pain level gets too intense. If you know that you will be doing a lot of physical activity, we encourage you to take your medication at least one hour ahead.

** If you have trouble swallowing pills, discuss this with your health care provider. DO NOT open capsules or crush tablets as this can make you sick or give you too much pain medication at one time.

Many pain medications contain acetaminophen (Tylenol®). Exceeding the recommended maximum amount of acetaminophen allowed in a 24 hour period could result in a life-threatening overdose. If you are taking a prescription pain medication that contains acetaminophen, we recommend that you do not take additional over the counter acetaminophen (Tylenol®). Consult with your healthcare provider about safe medication dosing and potential interactions. Keep a list of all of your current medications, including vitamin supplements available, in case of a medication related problem.

We recommend that you keep all pain medication in a secure location and clearly marked to avoid any confusion as to the medication’s purpose.
Other than taking your oral pain medication, there are a number of ways to help control post-operative pain.

- Using a cold pack to ice the affected area a few times a day (15 to 20 minutes at a time) can help to relieve pain, reduce swelling and bruising, and restore strength and mobility more quickly. Remember to put a thin sheet or pillow case over the skin to prevent direct contact between the ice pack and your skin.

- Elevation of the affected area can also help to reduce pain and prevent swelling.

- Relaxation exercises such as slow rhythmic breathing can help you deal with your pain. Pacing your activities, as you can tolerate them, will help the healing process. Remember, healing takes time.
Common Side Effects of Pain Medications

Pain medications have side effects. Such side effects may include:

- Dizziness
- Constipation
- Itching
- Vomiting
- Drowsiness
- Abdominal pain
- Nausea
- Urinary retention (trouble passing urine)

If you are having difficulty breathing, swallowing, or feel the sensation of your throat closing, consult your surgeon or internist, and/or report to the nearest emergency room for treatment immediately. A rash is not an expected side-effect, and may be an indication that you are allergic to the medication you are taking – if you get a rash, please consult your surgeon or internist immediately.

Of the side effects listed above, constipation is one of the most common. After surgery, if you are experiencing mild constipation:

- increase your intake of fluids (water and apple/prune/apricot juice)
- eat fresh fruits and vegetables to help ease constipation and promote regularity.
- physical activity may also help to promote regularity.

However, if these interventional methods are not effective for you, the bowel regimen outlined on the next page should help you maintain regularity as you continue to take your pain medication.
Bowel Regimen for Constipation in Adults

Day 1 - 2
- Docusate (Colace)* 100 mg capsule 2-3 times per day
- Senna* 2 tablets at bedtime
  Increase by 2 tablets at mealtimes up to a maximum of 8 tablets per day if no bowel movement by day 3
  OR
- Senna S* (combination of Senna & Docusate) 2 tablets at bedtime
  Increase by 2 tablets at mealtimes up to a maximum of 8 tablets per day if no bowel movement by day 3

Day 3
- Continue as above and add Milk of Magnesia* 30ml, 2 tablespoons once or twice per day

Day 4
- Continue as on Day 3 and add a Biscodyl* rectal suppository. You may also take an enema if you are uncomfortable

*These medications (Colace and Senna) are non-prescription and can be purchased over the counter at any pharmacy. Please consult your pharmacist if you have questions about these products.

* This bowel regimen should only be used by adults over the age of 18 years old who are experiencing constipation as a result of narcotic pain medication use. Patients under the age of 18 should NOT follow this regime but should consult their medical doctor or pediatrician for advice on relieving narcotic related constipation.

- Please avoid bulk formers such as Metamucil - they can make constipation worse.
- If you develop diarrhea, please immediately discontinue your bowel medications.
- As your need for pain medications decreases, you should need fewer bowel medications.
As you begin to heal, you will gradually use less pain medication. This is usually achieved by spacing the frequency of the doses and decreasing the number of pills taken. Rapid discontinuance of opioid pain medications can cause you to experience withdrawal symptoms. The symptoms will vary depending on how long you have been taking the medication. These symptoms include:

- Abdominal cramping
- Anxiety
- Sweating
- Dilated pupils
- Increase blood pressure
- Headache
- Insomnia
- Muscle twitching
- Diarrhea
- Shortness of breath
- Increase heart rate

The duration of these symptoms can last for a few days. As you are tapering off your opioid pain medication, if you experience any of these symptoms please contact your physician’s office.
Commonly Asked Questions

How long will I be on pain medication?
Everyone progresses at a different pace, but generally patients take pain medication for a few weeks after surgery. Most patients take their pain pills at regular intervals for the first two weeks. Less frequent dosing is usually tolerated thereafter due to the healing process and physical therapy. Generally, patients are able to stop taking pain medication approximately 4 to 6 weeks after surgery.

How do I safely stop taking pain medication?
If you have been taking pain medication regularly, do not abruptly stop taking your medication. This can cause a serious health risk. Please speak to your health care provider to discuss a plan for tapering these medications.

Could I become addicted to pain medication?
It is rare that patients become addicted to surgery-related pain medication. Most patients that undergo routine orthopedic surgery need pain medication for only a short time, therefore the risk of dependence or addiction is very low. Long-term use (several weeks to months), however, may increase the risk of dependence and addiction.

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