

TYLENOL IS OKAY

The following is a partial list of the more common medications and substances that can increase your tendency to bleed during the post-operative period:

Advil	Fiorinal
Alcohol	Ginko Biloba
Alka Seltzer	Ginseng
4-Way Cold Tablets	Green Tea
Anacin	Garlic
Anaprox	Ibuprofen
APC	Indocin
Ascodeen	Indomethacin
Ascriptin	Meclomen
Aspirin	Medipren
Bufferin	Midol
Brufen	Motrin
Cephalgesic	Nalfon
Cheracol Caps	Naprosyn
Clinoril	Norgesic
Congesprin	Nuprin
Cope	Percodan
Coricidin	Phenaphen
Coumadin	Quagesic
Darvon	Sine-Aid
Darvon with ASA	Sine-Off
Dolabid	Trandate
Dristan	Trental
Easprin	Trigesic
Ecotrin	Trilisate
Empirin	Vanquish
Emprazil	Vitamin E
Excedrin	Voltaren
	Zorprin

INFORMATION ABOUT YOUR POS' PROCEDURE PAIN MANAGEMENT

We want to work with you to lessen or relieve pain after your procedure.

Keeping pain under control will help you get well faster. You can return to your normal activities and regain strength more quickly.

The key to pain control is:

- Take pain medication as soon as the pain starts
- Take pain medication before you start doing anything that will cause pain such as walking, dressing, etc. It is harder to ease pain once it has started.

To help us measure your pain, you will be asked to rate your pain (if any) prior to your procedure, and before and after a dose of pain medication. Rate your pain on the 0 to 10 Pain Scale drawn below.

0 = no pain 5 = moderate pain

10 = the worst pain imaginable.

No pain Moderate Worst pain

0 1 2 3 4 5 6 7 8 9 10

While in the Surgery Center, tell your nurse if your pain is not relieved or if the pain relief wears off too quickly. Getting “hooked” on pain medication should not be a concern. Studies show that this is very rare – unless you have a history of drug abuse.

Anesthesia Information

You may require one or more types of anesthetics for your procedure. You may have some discomfort specific to the different types of anesthesia.

General Anesthesia: You will be asleep

- You may have a sore throat. Use throat lozenges as needed
- Drowsiness may last for 24 hours after procedure
- If you have nausea that does not go away, call your doctor

Regional Block: Specific body area will be numb and weak

- Feeling will begin to return gradually. When you start to have a tingling feeling, take oral pain medicine right away. Do not wait for all the feeling to return or it will be hard to control the pain
- Protect the numb area from injury until feeling and movement return fully. If numbness and/or weakness persist after 24 hours, call the Center. This rarely occurs.

Spinal/Epidural: From waist down will be numb

- You may be with us for a longer period of time after your procedure because you must have sensation and movement before going home
- If you have a headache when you stand up that goes away when you lie down, lie flat and call your doctor. This is a rare side effect.

The following can be helpful for mild to moderate pain and to boost the effect of pain medicine.

- Elevate the extremity above heart level (if appropriate)
- Apply cold packs or cold therapy apparatus **intermittently** as ordered by your doctor
- Practice slow rhythmic breathing for relaxation. Breathe in and out slowly and regularly. Imagine that you are in a place that is very calming and relaxing for you. End with a slow deep breath!

Once You Go Home

Know your pain control plan.

- You will be given a prescription for pain medication (either at doctor’s office or a time of surgery). Take it as ordered; follow directions carefully. Some medications cause nausea if not taken with food. If you continue to have nausea, call your doctor. Drowsiness is a common side effect.
- If your pain is not relieved or gets worse **CALL YOUR DOCTOR**
- When your pain lessens, you may switch to over-the-counter pain medication (no aspirin)
- Many prescription pain medications cause constipation. Increase your intake of water, fruits and vegetables. To help reduce this side effect, try walking as tolerated.

Non-Drug Pain Relief