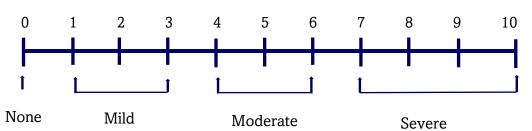
# Managing Pain After Surgery



Pain after surgery is a normal part of recovery and is different for everyone. Pain relief after surgery is an important part of your treatment. It may not be possible to take all of your pain away. The goal is for your pain to be tolerable or manageable so you can do everyday things. You will still have some pain even with medicine and non-medicine pain relief. The pain scale below will help you talk about your pain.

# Numeric Pain Rating Scale



# Non-Medicine Pain Relief

There are many ways to help reduce or relieve pain in addition to or instead of medicine.

# Ice or Cold Therapy

- Using ice right after surgery may help with some of the swelling and pain.
- Use it for only 15 to 20 minutes at a time. You can do this multiple times a day.
- Always make sure you have something in between you skin and the ice, like a towel, pillowcase, t-shirt, etc.

#### Heat

- If ice does not help with your pain, you can try heat.
- Do not put heat right on your incision. Use it on the sore or stiff muscles around your incision.
- Always make sure you have something in between you skin and the heat, like a towel, pillowcase, t-shirt, etc.

#### **Move Around**

- Try to take short, frequent walks every 1 to 2 hours while you are awake.
- Change positions every 45 to 60 minutes. Use the logroll technique from your Spine Surgery book.

#### **Relaxation Techniques**

- Try some deep breathing exercises.
- Listen to music.
- Watch TV, read a book, or play a game.
- Find activities that make you laugh.
- Practice meditation and other mindful activities.

# Pain Medicine

You will go home with medicine to help with your pain. Your doctor will talk with you about what medicines are right for you. Everyone is different and may need different medicines. Talk to your doctor or pharmacist if you have questions or concerns about the medicine you will take. Your discharge instructions will tell you:

- What medicines you will take to help with pain.
- The dose of each medicine.
- How long you will take each medicine.
- When to take each medicine.
- Possible side effects from the pain medicine.

## **Non-Opioid Pain Medicine**

- It is a good idea to take your non-opioid pain medicine at regular, scheduled times and not as needed. This will help give you a good level of baseline pain control.
- Non-opioid pain medicine can include, but is not limited to:
  - Acetaminophen (Tylenol®)
  - Ibuprofen (Motrin®, Advil®)
  - Muscle relaxants:
    - Cyclobenzaprine (Flexeril®)
    - Methocarbamol (Robaxin®)
    - Tizanidine (Zanaflex®)
  - Nerve pain medicine:
    - Pregabalin (Lyrica®)
    - Gabapentin (Neurontin®)

## **Opioid (Narcotic) Pain Medicine**

- Only use opioid pain medicine when needed for moderate to severe pain that non-opioid medicine does not help.
- Opioid pain medicine is not for long-term use.
- Opioid pain medicine can include, but is not limited to, Tramadol, Norco, or Oxycodone.
- You are encouraged and expected to decrease the amount of opioid pain medicine you use as you heal. You do this by increasing the time between doses.

# Sample Pain Medicine Schedule

Below is an example of a "multimodal pain regimen" schedule. This means you take different medicine throughout the day to help manage your pain.

- This is just an example. Only take the medicine your doctor prescribed or told you to take.
- Take opioid pain medicine as it is prescribed and only as needed.

Example Schedule	
7:00 a.m.	<ul><li>Acetaminophen (Tylenol®)</li><li>Muscle Relaxant</li></ul>
10:00 a.m.	<ul> <li>Ibuprofen (Motrin®, Advil®) – if approved by surgeon</li> <li>Opioid (only if needed)</li> </ul>
3:00 p.m.	<ul><li>Acetaminophen (Tylenol®)</li><li>Muscle Relaxant</li></ul>
4:00 p.m.	<ul> <li>Ibuprofen (Motrin®, Advil®) – if approved by surgeon</li> <li>Opioid (only if needed)</li> </ul>
10:00 p.m.	Muscle relaxant
11:00 p.m.	Opioid (only if needed)