FAST FACTS: Pain After Surgery

Pain control after surgery is important for both you and your healthcare provider. Controlling pain and managing the side effects of pain medications are important for your comfort following surgery, as well your recovery and rehabilitation following the procedure.

✓ Planning for surgery
  • Discuss the following with your surgeon and healthcare team prior to surgery
    ▪ Pain expectations- your surgeon should explain what pain is typically seen with this type of surgery.
    ▪ Share your previous pain experiences with your surgeon or healthcare team.
    ▪ Discuss any chronic pain issues you currently experience and your treatment plan for managing your chronic pain.
    ▪ Review your current medications with your surgeon or healthcare team.
    ▪ Discuss alcohol drug use- including history of misuse.
    ▪ Discuss the possible treatment plan your healthcare team plans to implement post-surgery, including pain medications, nondrug treatments, activity expectations, limitations, etc.
    ▪ Discuss any possible side effects of pain medications your healthcare team plan to prescribe post-surgery and the plan to manage those potential side effects.
    ▪ Discuss any other concerns you may have about the procedure and recovery period.

✓ What type of pain to expect after surgery?
  • The type of pain you experience will depend on the type and site of your procedure.
  • The site of your surgery is often not the only area where you may experience pain.
  • Other types of pain you may experience include:
    ▪ Muscle pain from laying on the operating table in the neck, shoulders, back or chest.
    ▪ If you have general anesthesia (a sleep-like state during which you feel no pain because you are unconscious), your throat may feel sore or scratchy from the tube they used during surgery to ensure you receive enough oxygen and protect your lungs from blood and other fluids, such as stomach juices.
    ▪ Pain with movement- depending on the type of surgery you experience, you may feel increased pain at your surgical site when you sit up, walk, cough, etc.

✓ Reporting Pain
  Your healthcare team:
  • needs to know if your pain is not well-controlled.
  • will frequently ask you to rate your pain during your recovery period.
  • will routinely ask you to rate your pain on a 0 to 10 scale with “0” being “no pain” and “10” being the “most intense pain imaginable.”
  • may use a pain assessment tool to help you determine the level of your pain.
See examples of potential pain tools below. Full descriptions of these pain assessment tools and others are available at: [https://geriatricpain.org/selected-pain-assessment-tools-oa](https://geriatricpain.org/selected-pain-assessment-tools-oa)

### Iowa Pain Thermometer - Revised

Or Verbal Descriptor Scale (VDS)

![Iowa Pain Thermometer](image)

### FACES Pain Scale Revised (FPS-R)

![FACES Pain Scale](image)

- If needed, changes may be made to your pain management plan based on your feedback to the healthcare team.

**✓ Management/Treatment**

- Pain management will vary depending on the type of surgery you experience.
- If you have major surgery:
  - You will probably have an IV tube, also called a catheter, placed in a vein in your hand or arm prior to surgery to provide you with fluids, sedatives, pain medications, and other types of medications both before and after surgery.
  - Epidural analgesia involves injecting pain medication through a catheter into the epidural space in your spinal canal but not into your spinal fluid. This type of treatment is often used during major abdominal surgery.
  - Some surgeries are completed with the use of spinal anesthesia, medications injected into your spinal fluid. This type of pain mediation is easier and works faster than epidural analgesia, but the pain relief does not last as long since there is no catheter to allow additional medications.
  - A nerve block uses a local anesthetic (medication that blocks pain) to provide targeted pain relief to a specific area of your body like an arm or leg. This medication works to block pain messages from traveling up a nerve to your brain - thus blocking the feeling of pain.
- If you have minor surgery or once you are discharged following a major surgery:
  - Your healthcare team will provide a treatment plan which may include the use of oral pain medications such as opioids or over the counter pain medications (i.e., acetaminophen or ibuprofen) and non-drug therapies (such as ice, increased rest, physical therapy, and limited activity).
  - Be sure to follow your post-surgical treatment plan and report any issues noted, such as increased pain or medication side effects, to your healthcare team.
✓ **What Else You Should Do**

- Be honest about your pain following surgery—be specific about the level of pain, where pain is located and any uncomfortable side effects from medications you experience. Share this information with your surgeon or other members of the healthcare team.
- Once you are home following surgery, use a [Pain Diary](#) to note important information useful to the healthcare provider.
- Try a non-drug treatment and document the impact on your pain in your Pain Diary.

**References**

