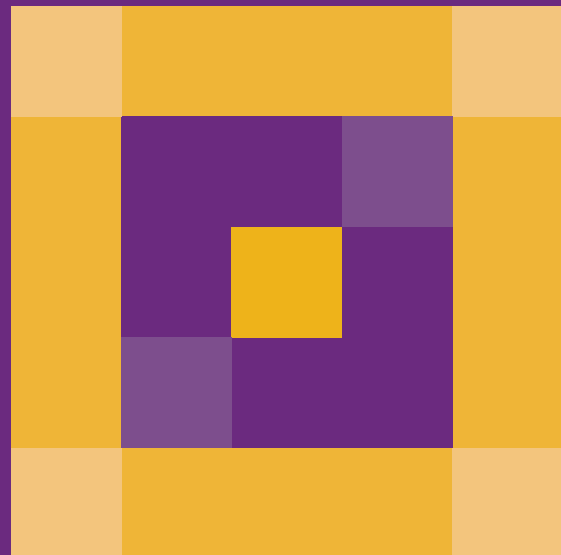
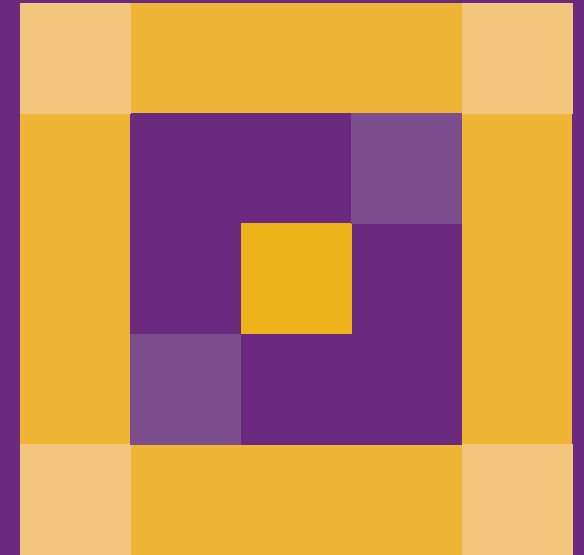


At Rush North Shore, we know that pain is a very personal matter and requires individual attention. We have developed a comprehensive program to help you control your pain and speed your recovery. Our unique combination of pain control methods is not readily available at many other hospitals. With pain under control your fears are lessened, you can actively participate in rehabilitation, and may even get out of the hospital sooner.



Managing Your Pain



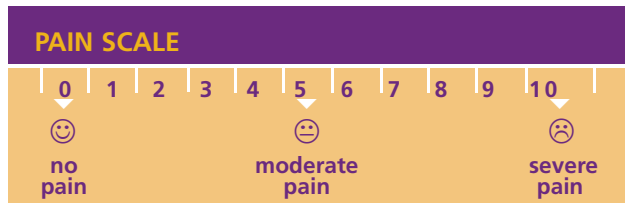
Frequently Asked Questions

What can I do to help in my pain management?

Tell your doctors and nurses which pain-control methods have worked well or not so well for you in the past. Express your concerns about pain medications. Ask about side effects and risks that may occur with pain management.

How do I measure my pain?

We ask you to use a 0-10 scale to rate your pain so we may determine if the current methods of pain control are satisfactory. The location and quality (burning, sharp, aching, etc.) of the pain also guides us as to what to prescribe for you.



Will I become addicted to the pain medications?

It is extremely rare for a patient being treated for pain to become addicted. Do not be afraid to take an adequate amount of medication to receive the relief that you need.

Can I take my usual pain medications at home before surgery?

Check with your surgeon for his/her specific instructions. Most chronic and cardiac medications are usually continued but you may be asked to stop taking certain blood pressure medications a few days before your surgery. Most patients are asked to stop taking anti-inflammatory drugs and aspirin for up to two weeks before surgery because of their tendency to cause increased bleeding.

When will I talk to someone from the anesthesia team?

After checking into the Ambulatory Surgery Unit, you will be taken to the pre-operative area where a member of your anesthesia team will interview and examine you. He or she will explain what types of anesthesia are available for you and what can be done to help with post-operative pain. We are there to answer all your questions in easy-to-understand language.

What is available at Rush North Shore to help me with my pain?

Patient Controlled Analgesia (PCA) is a pain control method using a programmable pump connected to an IV. We individualize the settings to suit your needs and include a push button so you can give yourself additional pain medication when you feel you need it. The amounts are controlled so you cannot overdose.

With **Epidural Analgesia** we can give you continuous medication through a catheter in your back, both during and after surgery, using combinations of local anesthetics and pain medications. This pain-control method also has a push button, which allows you to give yourself additional epidural medication if you feel you need it. This is a safe and effective way to reduce pain with less general anesthesia during your surgery. This is the same type of epidural used by women during labor and delivery.

Nerve Blocks are injections of local anesthetics that are very helpful in supplementing epidurals or PCA's and in reducing pain both during and after surgery. Most commonly we use nerve blocks for total knee replacement surgery, but they can also be used for certain operations on the shoulder, arm, hand, knee and foot. They are extremely safe and very effective. Individual injections last from 6 to 12 hours or more. There is less nausea associated with the use of nerve blocks, but not all patients are good candidates for them.

Oral medications are prescribed when your pain symptoms are lessened in preparation for your discharge. Our pain service uses a variety of medications to minimize side effects and maximize effectiveness.

What are the side effects of these pain-relieving methods?

Side effects differ from person to person. Pain medications can cause constipation, drowsiness, decreased breathing, and dizziness. Epidurals can cause numbness, itching, drowsiness and slowed breathing. All of these side effects can be prevented or treated. Nerve blocks cause temporary numbness in the area of the nerves that are blocked.

Who is available to help me with my pain control?

Your nurse is trained to help you with your pain management. We have a pain team made up of dedicated pain nurses, attending physicians, and a pharmacologist to assist you.

Am I being weak or a pest if I call my nurse for pain medication?

No. We can only help you if you let us know that you need help.

Will I be pain free right after surgery?

Having realistic expectations will ensure a pleasant experience. While being pain free is an admirable goal, it is often not realistic. Our goal is to help you with your pain control so that your pain is manageable and you are alert and able to actively participate in your recovery.

Our Pain Management Team is here to provide you with individualized care. Your safety and your comfort are our priorities.