

## PAIN CONTROL WITH AN EPIDURAL

### **What is an epidural?**

An epidural is a small *catheter*, or tube, that is put into your back before surgery by an anesthesiologist. A pump pushes pain medication into the tube to provide pain relief.

### **What can I expect?**

An anesthesiologist will place your epidural in your back before surgery. S/he will numb a small area with a medication. You may feel a small sting. A needle is placed into your back. A tiny tube is then placed through the needle and the needle is then removed. The tube is secured with a large amount of tape. It is then connected to a pump, which will deliver a continuous amount of pain medication.

### **How will others know if I am in pain?**

Your nurses will be asking you to rate your pain on a scale of 0-10 (0 = no pain, 10 = worst pain imaginable) at least every four hours.

Pain is a hard thing to measure and only you know for sure how much pain you are in. If your pain increases and/or your pain is preventing you from being able to take deep breaths, walk, or move comfortably, let your nurse know. S/he can increase the amount of pain medication you are getting. You may not be 100% pain-free, but your doctors and nurses will do everything they can to make sure you are as comfortable as possible. While in the hospital, you will be an active participant in your recovery (you will be expected to walk, cough, take deep breaths, etc.).

### **How does an epidural work?**

The pump will be programmed to give a set amount of pain medication based on your size, age, and type of surgery. Every patient is different, so you may require either more or less pain medication than the amount that you are first given.

Your nurse will be monitoring your sleeping, breathing, and pain level to make sure you are receiving the correct amount of medicine for your pain level. The amount of medicine can be increased or decreased, depending on your level of pain and other symptoms.

### **What you should tell the nurse:**

Itching, nausea, and constipation are all possible side effects of epidurals. Let your nurse know if you are experiencing any of these effects. Itching, nausea, and constipation can often be treated with medications. Leg numbness/tingling can be caused by the medication in the epidural. You should not attempt to walk alone. Always ask for assistance from your nurse. The amount of medication you are receiving might be adjusted to relieve numbness and tingling.

### **When and how will the epidural be taken out?**

Your own doctor and/or an anesthesiologist will determine when the epidural will be taken out. This is usually a few to several days after surgery, when you are able to drink fluids without nausea or vomiting. An anesthesiologist will come to your room, remove the tape from your back, and pull the tiny epidural out of your back (the tube is about 4 inches inside your back).

### **Will I have pain after the epidural is out?**

It is expected that you will still have some pain after the epidural is taken out, and your nurse will regularly ask you to rate your pain.

Pain pills will be available for you to take as needed. However, these pain pills are NOT scheduled, meaning you will need to ask for them.

If you are experiencing pain that is preventing you from coughing, deep breathing, walking, etc., it is important for you to let your nurse know. S/he will then bring you pain medicine.

*If you have any further questions, please ask your doctor or nurse.*

		<u>0-10 Pain Scale</u>											
no pain		moderate pain										severe pain	
0	1	2	3	4	5	6	7	8	9	10			

Resources:

Acute Pain Management: Operative or Medical Procedures and Trauma. U.S. Department of Health and Human Services, Agency for Health Care Policy and Research Publication Number 92-0032, 1992.

McCaffery, M. and Pasero, C. (1999). Pain Clinical Manual. 2<sup>nd</sup> ed., Mosby, Inc., St. Louis, Missouri.

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