Pain Control After Surgery
Managing your pain is an important part of your recovery. It is important that you are able to take deep breaths, cough, and move.

We will ask you regularly about your level of comfort. When patients can talk we ask them to use the UVA PAIN SCALE:

Preventing and treating your pain early is easier than trying to treat pain after it starts. We will work with you to create a specific plan to stay ahead of your pain using multiple methods.

- We will treat your pain during surgery.
- You will get medicines to keep you comfortable. These may include NSAIDS, acetaminophen, narcotics, muscle relaxers.
- You may receive a PCA (Patient Controlled Analgesia) Pump with IV (Intravenous) pain medicine.
  - For safety - ONLY you, the patient, are allowed to push the button for pain medicine.
- If you have been taking pain medicines before surgery, our pain specialists will address your needs.
- We offer distractions, ways to relax and other resources to help you be comfortable. Ask your nurse.

Some patients cannot tell us they have pain. Your nurse looks for behaviors that might be signs of PAIN. Care Partners and family can help by looking at you and letting the nurse know if they see:

- Calling out (ex. “ouch”, “help”), moaning, crying;
- Body movements, swatting, resisting, hugging or rubbing body areas;
- Changes in interactions with family or friends;
- Changes in activity patterns or routines like eating or sleeping;
- Acting confused, restless, less interested, or more angry.

Narcotics can slow your recovery and cause constipation. We will work with you to decrease the amount of pain medicine as you recover from your surgery.