

The Acute Pain Service (APS) is comprised of anesthesiologists and an advanced practice nurse working in collaboration with the interprofessional health-care team (pharmacists, physicians, physiotherapists, nurses, etc.). We strive to provide the most current and effective methods of pain control. The APS is involved with patients' care prior to surgery, during surgery and after surgery. The main focus of the APS is to provide pain and symptom management to patients after surgery. We will try to make sure you have as little pain as possible after surgery.

### **What is pain?**

Pain is an unpleasant feeling, such as soreness or discomfort that is different for every person. Pain can tell you when something is wrong with your body and when you need to ask for help.

Surgery causes pain for most people because tissues are moved and/or cut. Pain that is not treated can be severe. It is important for your recovery not to have severe pain.

### **Who will assess my pain?**

Many health-care team members will want to know about your pain (ex. nurses, doctors, physiotherapists). People feel pain differently, even if they have the same surgery. As only you know how you are feeling, it is important that you communicate your pain to your health-care team. We want to know how much pain you are experiencing and how well the treatments are working.

A common way to assess your pain is to ask you to rate your pain. For example, on a scale of 0 (being no pain) to 10 (being the worst pain), how would you rate your pain? Our goal is to keep your pain below a 4 out of 10.

### **Why is pain control important?**

With less pain, moving and breathing is easier. By moving after surgery, you may avoid problems that can delay your recovery. Getting out of bed and walking after surgery keeps your muscles strong and prevents blood clotting. Deep breathing after surgery helps prevent lung problems.

### **How will my pain be managed?**

Treatments are available to help relieve pain. We use medication, nerve blocks, epidurals and support non-medicinal management such as using ice/heat, deep breathing and relaxation exercises. Culture influences how people express and treat their pain, so it is important to share your preferences with your health-care team.

Depending on your surgery, you may be given pain medication prior to going into the operating room. This is offered to decrease the pain cycle from starting. Medication containing an opioid (morphine or similar) is usually given for pain after surgery. This medication may be given by a needle or through your intravenous line (IV) at first. Once you start to drink or eat, pain medication is given in a pill form.

Following surgery, select patients may be prescribed a Patient Controlled Analgesia (PCA) pump. This allows you to treat your pain quickly by pushing a button when you feel pain or can be used prior to moving to decrease pain that may be experienced. Medication will be delivered through your IV. There are safety features on the pump to limit you from getting too much medication and nurses will monitor you closely. You are the only person who is allowed to push the button.

Some patients may receive an epidural or a nerve block, administered by the anaesthesiologist, for surgery. These decrease your sensation to a targeted area so you do not experience pain for a time after the surgery. You may have numbness that should resolve when the treatment is complete.

### **Do pain medications have side effects?**

Yes, but many of these are treatable. Some patients may experience constipation, nausea and/or vomiting, itching, dizziness or drowsiness with opioids. Please tell us if you are experiencing any of these and we will work to manage these possible side effects.

### **What can I do to manage my pain?**

- Communicate your pain to your health-care team members
- Plan for your activity by taking medication 30 minutes prior
- Let your nurse know if the treatment is not decreasing your pain
- If you had surgery in the area of your stomach or chest, hold a pillow against your incision while you cough or do deep breathing exercises
- If you experience gas pain, walking will help to relieve it
- Try reading, listening to music, watching TV, deep breathing and quiet activities for distraction

*Adapted from J. Watt-Watson, et al. (2004). Impact of preoperative education on pain outcomes after CABG surgery. Pain, 109:73-85*