



The term “perioperative” refers to the period of time that starts when you go to the hospital for surgery and ends when you are discharged. From a pain management perspective, the plan of how your pain will be treated *after* surgery begins *before* surgery.

Pain management is important whenever you have surgery. It is even more important when you have an amputation, because evidence suggests that the better your pain is managed during the time immediately after surgery, the fewer symptoms of phantom pain you will experience.

You have an important role in pain management, from the minute you enter the hospital until the time you leave. You are a member of your pain management team! Before surgery, you will be giving information about your past experiences with pain management; after surgery, you will be letting your doctors and nurses know how well the pain medications are working.

About the Amputee Coalition

The Amputee Coalition is a donor-supported, voluntary health organization serving the nearly 2 million people with limb loss and more than 28 million people at risk for amputation in the United States.

For more information, please call **888/267-5669** or visit **amputee-coalition.org**.



Perioperative Pain Management

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Before Surgery

When you are admitted to the hospital, you will be asked a lot of questions about pain, including if you currently have pain and if you have been taking pain medication. Be patient! The questions may seem like they are repeated over and over again by the doctors and nurses, but the more information you can give them, the better they will be able to prescribe the best medications for you to use after surgery.

Here is some of the information you will want to give your healthcare team:

- What medications are you currently taking for pain, including non-narcotic medications? Include over-the-counter medications and herbal supplements.
- If you have taken pain medications before, let them know how well they worked. Did you have any side effects that you found particularly unpleasant? Did one medication work better than another?
- Have you ever gone to a doctor who specializes in pain management?
- Are there other things you have done or are doing to help relieve pain? Have you tried cool or warm packs, elevation or TENS (transcutaneous electrical nerve stimulation)? Is there something you do to help you relax when you are having pain?

The answers to all of these questions will help your healthcare team create a pain management plan that is right for you.

Pain Scale

While you are in the hospital, you will be asked over and over again to rate your pain. The information you give about your level of pain will help the doctors and nurses make sure they are giving you the right amount of pain medication.

There are several different pain scales that can be used, but the two most common are the “Faces” scale that is generally used for pediatric patients and a number scale that asks you to rate your pain from “0 – 10” (“0” being no pain and “10” being the worst possible pain). There is no “right” or “wrong” number for pain. The scales just allow you to tell your healthcare team how much pain you are having and if it is getting better or worse.

Since you will be asked for your “pain number” over and over again, it can seem repetitious and boring. But hang in there – it is all part of helping make sure your pain is managed as well as it can be.

Pain Management After Surgery

There are a growing number of methods to help with pain management after surgery. Some of these are started during the surgery itself and can be continued for several days after surgery; these include:

- **Nerve blocks** — where an anesthetic or pain medication is injected near a nerve.
- **Epidural blocks** — where an anesthetic or pain medication is injected just outside the spinal cord but inside the spinal canal.

Another option is a spinal block – where an anesthetic or pain medication is injected into the spinal cord to mix with the spinal fluid. Unlike the nerve block or the epidural block, spinal blocks cannot be continued after surgery.



Narcotic pain medication will also be used for pain management. Generally, these medications are administered through your IV, often through a patient-controlled analgesia (PCA) pump. Your doctor will order the medication to be given through the PCA, and then you will be able to give yourself doses by pushing a button. No waiting for a nurse to bring you your pain medication!

Non-narcotic pain medications may also be helpful, as are ice packs and extremity elevation.

Some hospitals now have complementary therapies available to help with pain management. Relaxation techniques, massage, aromatherapy, music therapy and acupuncture have all been found to be helpful for some patients. You may want to ask if any of these therapies are available for you to use after surgery.

Leaving the Hospital

As your pain lessens after surgery, you will be transitioned from IV pain medications to pain pills. You will continue to take pain pills after you leave the hospital. The need for these medications will decrease over the first few weeks. You will probably find that ice packs and relaxation techniques continue to be helpful.