



## POST-SURGERY PAIN MANAGEMENT

Please review these instructions on controlling postoperative pain carefully. They will help provide you with the best experience after your surgical procedure. Our goal for you is to manage your pain well enough to allow you to do the things you need to do in order to heal: walk, eat, breathe deeply and sleep.

It is normal to feel pain after your surgery. This pain is usually the worst for the first 2-3 days. Your pain can often be well controlled with a schedule of over-the-counter medications as discussed below. Prescription opioid pain medications is only one part of your pain management plan.

### Medication Based Treatments

1. Take 2-3 tablets of over-the-counter Tylenol 325mg (or generic acetaminophen) every 6 hours for 3 days, then only as needed to control discomfort. [DO NOT exceed 4000 mg in a 24-hour period, as this can be damaging to your liver]
2. Take 2-3 tablets of over-the-counter Advil or Motrin 200mg (or generic ibuprofen) every 6 hours with food or milk for 3 days, then only as needed to control discomfort. [DO NOT use Advil/Motrin if you have a history of stomach or intestinal ulcers or have had problems taking aspirin in the past]
3. You may stagger Tylenol and Advil so that you are taking something every three hours, or you may take them together every 6 hours - it's your choice.
4. A prescription for an opioid (narcotic) pain medication will be given to you after your procedure. However, many patients do not need opioids to manage their post-surgical pain.
5. Only if you are having severe pain that restricts you from sleeping or getting out of bed after taking Tylenol and Advil as described above should you take your prescription pain medication.
6. You can wait to see if you have severe pain before filling your pain prescription. If you decide to wait, be prepared with access to a 24-hour pharmacy in case your pain worsens during off hours.
7. If you use an opioid, you must beware of becoming drowsy or inattentive. You will not be able to drive or operate heavy machinery while taking these medications. Additional side effects include dizziness, lightheadedness, constipation, nausea, and vomiting.
8. Although uncommon after an outpatient surgical procedure, patients can become addicted to opiates even after a short period of time. Minimizing or avoiding opiates is always recommended.
9. For surgical patients with post-operative pain, addiction to opiates is rare when they are used for 5 days or less.



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10. Fortunately, 90% of surgery patients report that their pain is either mild or gone after four days. If you have severe or increasing pain after 4 days, contact our office.
11. Medical studies have shown that 400mg of ibuprofen provides as much pain relief as 5mg of prescription opiates.

### Non-Medication Based Treatments

12. Applying ice to your hernia location and incisions for 20 minutes on and 20 minutes off is strongly recommended for at least 48 hours. Ziploc bags with crushed ice or frozen peas are commonly used along with a towel between the bag and your skin. Icing more frequently and for a longer duration is fine.
13. Having ice bags in a small cooler next to your bed while sleeping can allow you to change ice packs when waking during the first 1-2 nights.
14. The patients who ice the most have the least amount of pain and swelling after their surgery. Many patients who have elevated pain levels or uncomfortable swelling and bruising did not use ice regularly after surgery.
15. Some patients use other non-medication therapies for pain relief such as mindful breathing, music, relaxation, meditation, daily reflection and short walks.

### Warnings

16. Never crush your pain pills as this can alter the rate your body absorbs the medication and can lead to an overdose.
17. Patients with a history of abusing alcohol or recreational drugs, tobacco use, mood disorders, or long-term chronic pain are at a higher risk of developing a dependency on opiates.
18. Never take opioids with antihistamines or sleep aids, sedatives or tranquilizers, anti-anxiety medications, muscle relaxers, or another opioid. Combining these medications with opioids increases your risks of side effects.
19. Never mix alcohol with Motrin/Advil/ibuprofen or with opioids.
20. It is common to experience constipation while taking opioid pain medications after surgery. Increased fluid intake and taking a stool softener (such as Senokot S) will usually help or prevent this from occurring. A mild laxative (Milk of Magnesia or MiraLAX) should be taken according to package directions if there are no bowel movements after 48 hours.
21. You will have received intravenous opioid pain medications during your surgery. This alone can cause patients to experience constipation.
22. Some patients complain that constipation was their worst post-surgery issue. Please take preventing it seriously.

If these instructions do not help, please contact our office. Pain prescriptions cannot be called in to a pharmacy.