



Pain Management

After any surgical procedure, the management of pain is an important portion of your care. We know that pain is inevitable; in order to keep it at a tolerable level we will use a combination of medications to maximize your pain relief while keeping in mind your overall health and safety. Narcotic pain medications may be a portion of your pain management strategy, but we do try to wean all patients off these as quickly as possible to limit the risk of side effects as well as addiction.

NSAIDs:

- Do **NOT** take ibuprofen (Advil), naproxen (Aleve), aspirin or other NSAIDs in the 2 weeks prior to surgery or **3** days after surgery, as it may cause intra-operative or postoperative bleeding complications.
- It is **SAFE** to take acetaminophen (Tylenol) every 6 hours for the first 2 days, then you may decrease if you are not having pain.
- Please maximize acetaminophen (Tylenol). Narcotics used in conjunction with acetaminophen are more effective- so do not just jump to the narcotics, please take the acetaminophen.
 - For adults this is typically 2 tablets every 6 hours of either regular or extra strength Tylenol. Do not exceed the daily maximum which is 4000mg in a 24-hour period.
 - Plan on taking Tylenol every 6 hours for the first 2 days, then decrease if you are not having pain.
- Three days after surgery you may begin taking ibuprofen or naproxen if you have not had excessive bruising or postoperative bleeding. If you do not know if this is you, feel free to call our medical staff.
 - Ibuprofen dosing is three 200mg tablets every 6 hours (600mg total per dose). Do not exceed the daily maximum which is 3200mg in a 24-hour period.
 - This may be alternated with Tylenol so that you have one non-narcotic option available every three hours.
 - Ex: 12:00 Tylenol, 3:00 Ibuprofen, 6:00 Tylenol, 9:00 Ibuprofen etc.

This combination is very effective and often allows patients to stop taking their narcotics around the three-day time period.



Narcotics:

These may be prescribed for you; these are safe to begin after surgery and the instructions will be written on the bottle.

- Please be mindful that these can cause constipation, disorganized sleep, forgetfulness, and respiratory depression. Do not increase your dose without discussing it with your physician.
- Please wean yourself off these as early as reasonable. If you are having difficulty decreasing your narcotic use, make sure you are maximizing the non-narcotic options listed above and begin to stretch the time between dosing again until you have successfully stopped taking narcotics.
- It is important to get up, move around and take deep breaths after surgery to prevent other complications like DVT/PE (blood clots) or pneumonia, so take narcotics as needed to allow for ambulation and showering.

Gabapentin:

This is a non-narcotic medication that can be used to help with “nerve” pain. It must be taken on a scheduled basis, as a steady level must be kept in your system for the best function. It is not effective taken on an “as-needed” basis, and you will need to taper off this medication when ready to stop.

Muscle relaxants:

These are used with some procedures where the muscles are involved. The two common options are Valium and Flexeril. These may be taken in conjunction with your other medications, as prescribed. Combining narcotic pain medication with muscle relaxants will increase drowsiness. Please make sure you notify your provider of any other anti-anxiety medication you may be taking, as they can overlap with these muscle relaxants.

Non-medication options:

- **Warm showers** can be taken to aid pain and stiffness. Getting in the shower and slowly raising your arms and moving your body can help loosen your joints and muscles that tend to tighten



when you are not as active as usual. Typically, you may shower 2 days after surgery (even with drains) and your incisions can get wet. Do not soak incisions in a bath or hot tub for at least 4 weeks after surgery.

- **Ice packs** are valuable to limit swelling in the first 24-48 hours. Use these for no more than 20 minutes per hour. If you have numbness in a surgical area (ex: after abdominoplasty or breast reconstruction) be careful with ice as you may get frostbite at a lower temperature, so please do **NOT** use it in areas with numbness.
- **Heating pads** or warm packs may also be comforting but should **NOT** be used on numb areas as your skin may blister even on low settings. Typically, these are held until 48 hours after your procedure when the early swelling has stopped, and they can be more helpful.

Handling prescription narcotics:

- Narcotics should always be kept in a locked cabinet if possible. If you do not have a place to lock them away, at least store them high and hidden from children or visitors.
- When you have finished using your prescription medications, it is always wise to dispose of them safely. This may mean asking if your pharmacy, local fire station, or police station will accept narcotic prescriptions for disposal.

If you have any questions or concerns regarding your postoperative journey, please do not hesitate to call our office at (503) 292-9200 and speak with our medical staff.