

## Pre-operative Instructions

### Post-operative pain management:

Our team will help to develop a pain management plan that works for you in the hospital and at home.

### Goals:

It is expected that you will experience some pain after surgery. Goals for pain management are to provide comfort so that you can eat, get up out of bed, walk, and visit with family and friends.

### Commonly Used Medications:

*\*Medications can be used intravenous (IV), pills (by mouth), and some medications can be used through an epidural placed in your back prior to open incision surgery. Your doctor may also use local numbing medication around your incision(s).*

Medication Type	Examples	Possible Side Effects (Most common)
Opioid	Oxycodone, hydromorphone, Morphine, Hydrocodone	Constipation, sleepiness, dizziness, confusion, nausea, vomiting, tolerance/dependence/addiction
Opioid Analogue	Tramadol	Same as Opioids though less severe
Non-Steroidal Anti-Inflammatory (NSAID)	Ibuprofen (Motrin)	Stomach upset
Acetaminophen	Tylenol	Usually well tolerated, can cause liver dysfunction in high doses

### Other Pain Management Techniques:

- Distraction by visiting with family/friends, going for a walk, or doing other enjoyable activities
- Relaxation by resting in bed/chair, deep breathing, and/or meditation

### Opioid Medication Precautions:

To reduce the risks associated with opioid medications, our team will work with you to determine the appropriate number of pills to prescribe for you after your surgery.

While opioids can be a safe and effective pain medication they come with the risk of side effects and possibility of developing tolerance (the need to take more pain medication to get the same relief), and physical dependence (meaning you have symptoms of withdrawal when the medication is stopped). One in 10 cancer patients undergoing surgery can develop persistent opioid use after surgery.

### To reduce your risk:

- Safely store opioids out of reach of others (including friends, family and children)
- Do not use opioids for any other reason other than advised by your doctor
- Never share or sell opioids
- Never use another person's prescription opioids
- Safely dispose of unused opioid pills (see below)

### Safe Disposal of Opioid Medications:

Opioids should be disposed of after your recovery is complete.

### Drug Disposal Locations:

Baystate Wing Hospital 40 Wright St. Palmer, MA 01069	Baystate Medical Center 759 Chestnut St. Springfield, MA 01199
---	--

Not Local? Visit the DEA website for a disposal location near you:

<https://apps.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1>

### Follow-up After Your Surgery:

You will be asked about your pain medication usage, how many opioid pills you used, and your opinion of your pain control. These questions are to ensure adequate pain control for patients like you, without prescribing excess opioid medications that could be harmful to patients, families, and their communities.

## Opioid Use Discharge Instructions

### Pain management and pain medication information:

#### Goals:

It is expected that you will experience some pain after surgery. Goals for pain management are to provide comfort so that you can recover, including eat, get up out of bed, walk, visit with family and friends, and rest when needed.

#### Commonly Used Medications:

Medication Type	Examples	Possible Side Effects (Most common)
Opioid*	Oxycodone, Dilaudid (hydromorphone), Morphine, Hydrocodone	Constipation, sleepiness, dizziness, confusion, nausea, vomiting, tolerance/dependence/addiction
Opioid Analogue	Tramadol	Same as Opioids though less severe
Non-Steroidal Anti-Inflammatory (NSAID)	Ibuprofen (Motrin)	Stomach upset
Acetaminophen	Tylenol	Usually well tolerated, can cause liver dysfunction in high doses

#### Other Pain Management Techniques:

- Distraction by visiting with family/friends, going for a walk, or doing other enjoyable activities
- Relaxation by resting in bed/chair, deep breathing, and/or meditation

#### \*Opioid Medication Precautions:

To reduce the risks associated with opioid medications, our team will work with you to determine the appropriate number of pills to prescribe for you after your surgery.

While opioids can be a safe and effective pain medication, they come with the risk of side effects and possibility of developing tolerance (the need to take more pain medication to get the same relief), and physical dependence (meaning you have symptoms of withdrawal when the medication is stopped). Approximately 1 in 15 patients can develop persistent opioid use after surgery. One in 10 cancer patients undergoing surgery can develop persistent opioid use after surgery. The longer you take opioid medications increases your risk of becoming opioid tolerant/dependent.

#### To reduce your risk:

- Safely store opioids out of reach of others (including friends, family and children)
- Do not use opioids for any other reason other than advised by your doctor
- Never share or sell opioids
- Never use another person's prescription opioids
- Safely dispose of unused opioid pills (see below)

#### \*Safely Minimize Opioid Use after Surgery

1) Unless directed otherwise by your doctor, you can take Acetaminophen (Tylenol), and Ibuprofen (Motrin) together to control pain. These medicines each work differently, and can best help control pain when all are used together.

*You may receive a prescription for these medicines, however, both are available "over the counter" at your local pharmacy.*

2) Most patients will only require opioids for a short period of time after surgery.

#### To safely reduce your opioid dose:

- Increase the time in between doses
  - For example: instead of every 4 hours, take medicine every 6 or 8 hours as needed for severe pain
- Decrease the amount taken
  - For example: instead of 2 tabs, take 1 tab, or instead of 1 tab, take ½ tab at each dose

## Opioid Use Discharge Instructions

Non-Opioid Pain Medication Dosing		
Medicine	Dose	Maximum Dose/Timing
Acetaminophen (Tylenol)	325 mg (regular strength)	3 tablets every 8 hours
	500 mg (extra Strength)	2 tablets every 8 hours
Ibuprofen (Motrin)	200 mg (regular strength)	400 mg every 4 hours
	400, 600, 800 mg (prescription strength)	600 mg every 6 hours
		Up to 800 mg every 8 hours

Example Pain Medication Schedule			
8:00 AM	10:00 AM	4:00 PM	10:00 PM
Acetaminophen 500 mg take 2 tablets	Ibuprofen 600 mg take 1 tablet	Acetaminophen 500 mg take 2 tablets & Ibuprofen 600 mg take 1 tablet	Ibuprofen 600 mg take 1 tablet
Take opioid medications (i.e. Oxycodone, hydromorphone, Tramadol) <b>only as needed</b> for severe pain			

### \*Safe Disposal of Opioid Medications:

Opioids should be disposed of after your recovery is complete.

- 1) Opioid drop-box locations for safest disposal:

Baystate Wing Hospital  
40 Wright St.  
Palmer, MA 01069

Baystate Medical Center  
759 Chestnut St.  
Springfield, MA 01199

Not Local? Visit the DEA website for a disposal location near you:

<https://apps.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1>

- 2) If you cannot bring to a drop-box location, alternatively you can dispose in household trash:

*(Unless there is no other safe option for disposal, Do Not flush down the toilet – this can damage the water supply.)*

