

If you have any questions about the pain relief pump, please call the Anesthesia Pain Service.

Going Home With Your Peripheral Nerve Catheter and Pain Relief Pump

After surgery, you may have a peripheral nerve catheter and pain relief pump. The pump gives you a constant flow of local anesthetic (numbing medication). The medication flows around the nerves that lead to the site of surgery to block the feelings of pain. This lessens pain at the surgery site.

Along with oral (by mouth) pain medication, the pump should make you comfortable and relieve most of your pain. This will let you do tasks to help you recover such as therapy, deep breathing or coughing.

The pain relief pump is made up of a very thin tube (catheter) attached to a small container. Pain medication flows from the container to the catheter. The care team will put the catheter in either before, during or after surgery. They will hold it in place with a clear bandage and tape. You will wear a belt with a small pouch to support the pump and the tubing.

The pump gives you constant pain medication for about 40 hours.

Take the catheter out on _____ (day/date) at _____ (time). Go to page 4 “Removing the catheter” for instructions.

Catheter and pump care

Follow these guidelines to take care of your catheter and pump.

- Use the belt and pouch to support the catheter and pump at all times.
- Do not pull or tug on the catheter.
- Do not allow the catheter to become kinked or pinched.
- Do not disconnect the catheter from the pump.
- Keep the catheter site covered with a bandage. You do not have to change that bandage unless it falls off, or gets wet or soiled.
- While the pain relief pump is in place, do not shower or take a bath. If the bandage gets wet, it may loosen, and the catheter may come out.

Some leaks from the catheter may be normal. If this happens, do not remove the bandage. Instead, cover it with the extra gauze or clear bandages that we give you. **Please call the Anesthesia Pain Service if the catheter keeps leaking through the extra covering.**

Using your pump for pain control – bolus option

Your pump has been set to deliver a pre-set amount of numbing medication to manage your pain. In addition, your pump may have a button that allows you to give yourself an extra dose (bolus) of medication if your pain gets worse.

After you press the bolus dose button, it locks for a set time. During this time, you will not be able to give yourself extra medication, even if you press the button. This is for your safety to:

- Allow time for the medication to work
- Prevent you from getting too much medication

After the set time is up, the pump unlocks and lets you give yourself more medication if you still have pain.

The pain relief pump is meant only for you to use. Family members or visitors should never press the button without your consent. When someone else presses the button, they may be putting you at risk of getting too much medication.

Do not tamper with the pump or try to open it. This might cause the pump to stop working.

Taking oral pain medications

Your surgeon may prescribe oral pain medication along with the pain relief pump. Take your pain medications before the pain becomes severe. Once pain becomes severe, it is more difficult to relieve. When taking oral pain medication, follow your physician's guidelines.

Sometimes prescribed pain medications may cause sleepiness or dizziness.

If you are taking prescription pain medications:

- **Do not drive.**
- **Change your position slowly so you do not lose your balance.**

If you have severe pain that is not being managed by the pump and your pain medication, call both your surgeon and the Anesthesia Pain Service.

Safety precautions while you get local anesthetic medication

The nerve block may affect the way you sense your body's position and location. You may feel like you are not sure where or how your affected limb is actually placed or how it is positioned. Your limb — whether it is your arm or leg — may feel different or heavier. This can affect your balance and increase your risk of falling.

Until the block wears off completely, please be extra careful to prevent a fall. When the block wears off, feeling and movement will be back to normal.

It is important to follow your surgeon's discharge guidelines even if you have no pain:

- Do not drive.
- Do not do heavy lifting.
- Do not do heavy exercise.

It is important to be aware that the surgery site may be numb and weak.

- You may need help getting out of a bed or chair, walking, and getting dressed.
- Take extra care not to put **any** pressure on a numb or weak area.
- Stay away from sharp surfaces, or extreme heat or cold. Do not put a heating pad on the numb area. You may not feel it and you can burn yourself.

After surgery on your shoulder or arm

- Protect your arm.
- Keep your sling on as directed to support your arm. You might not be able to control movement of your arm.

After surgery on your leg or foot

- When sitting in a chair, raise your leg. Use pillows and soft pads to support and protect it. This will help prevent pressure injuries due to pressure over an area for a long time.
- **Protect your leg. As long as your leg is numb, it will also be weak. Ask for help to prevent falls. Never put weight on a leg that feels numb.**
- Use your crutches, walker or cane as instructed. If possible, have someone close by to give you extra support.
- When walking at home (with your walker or crutches), have someone clear a path for you to walk. Do not try to bend over to move things yourself when walking with a walker or crutches.
- If you have to climb stairs to get into your home, the physical therapist can teach you how to do this before you leave the hospital. Climb stairs only when you have to. Have someone help you. Take 1 step at a time. Do not put weight on the leg you had surgery on.

Magnetic resonance imaging tests

If you need a magnetic resonance imaging (MRI) test while you have the catheter and pump, let your physician and the MRI staff know. The catheter may contain metal. Because of the magnetic power of an active MRI machine, metal is dangerous when near one.

Taking the catheter out

Once all the medication in the container is gone, you can take the pump and the catheter out.

Follow these steps to take the catheter out.

1. Gather supplies:
 - 5 cotton swabs and isopropyl alcohol, or 5 alcohol wipes
 - A bandage or small gauze bandage and tape
 - A small plastic garbage bag
2. Wash your hands carefully with soap and water for 15 to 30 seconds.
3. Take the bandages or tape off the catheter or plastic tube. Do not take off any other bandages or drainage tubes that you may have unless your physician tells you to.
4. Firmly hold the catheter close to the place it goes into the skin.
5. Gently pull out the catheter. It should come out easily. If it does not come out easily, stop. Re-tape the catheter and secure the pump. Then, call the Anesthesia Pain Service.
6. Once the catheter is out, you may see some clear drainage at the site. Clean the site with a cotton swab dipped in alcohol or an alcohol wipe. Repeat if needed.
7. Cover the site with a bandage or clean gauze bandage secured with tape.
8. **Check the catheter tip to make sure it is not broken.** Depending on the type of catheter, the tip end may have black, blue or silver metallic markings.
 - ***If it seems to be in 1 piece:***
 - A. Put the catheter in a plastic bag with the tubing and the pump.
 - B. Seal the bag and throw it away.
 - ***If there is no marking at the tip:***
 - A. Put the pump, catheter and tubing in a plastic bag.
 - B. Wash your hands and **call the Anesthesia Pain Service**. Do not throw the plastic bag away. The physician may want to see the catheter and pain pump.
9. If you have a pain pump that has a battery, throw the pump away as you would any battery. Find a proper disposal center. Keep all items away from children and pets.
10. Wash your hands carefully when you are done.

You may still use oral pain medications, if prescribed, after you stop using the pump.

When to call the Anesthesia Pain Service

Call the Anesthesia Pain Service if:

- The catheter becomes disconnected from the pump.
- The catheter falls out of the incision site.
- Medication is soaking through the bandage. (You may note small leaks where the catheter goes into the skin. This is normal.)
- You have uncontrolled severe pain.
- The catheter site has these symptoms:
 - Redness
 - Feels very warm
 - Pain
 - Swelling
 - Drainage that is not clear
 - Bleeding

If you have any of these symptoms, close the clamp on the catheter and call the Anesthesia Pain Service:

- Numb lips
- Metallic taste
- Ringing in the ears
- Tremors/twitching

Call 911 if you have:

- Trouble breathing
- Seizures

Then, when you are able, call the Anesthesia Pain Service.

Contact information

Call the Anesthesia Pain Service at 312.695.7039 (24 hours a day) for any concerns or questions.