

Department of Anesthesia

Acute Pain Service Discharge Instructions

1. Nerve blocks are given to **greatly decrease pain after surgery, not stop it completely**. Patients who have had similar surgeries with nerve blocks report more than 90 % reduction in pain. Patients who receive nerve block infusions and/or pain medicine can be made quite comfortable, but they may still have a small amount of pain. Some patients who have a small amount of pain think their catheters are not working and pull them out, only to experience a lot of pain afterward. Please consider this when you feel some discomfort.
2. **Take your other oral pain medicine when you begin to feel some discomfort**. Do not wait until the pain is severe, as the pain medicine will not work as well. If you are pain-free, do not take your pain medicine because you risk having nausea and other undesired side effects.
3. Since the nerve block wears off gradually, it is normal for the affected area to have **no feeling or movement for 8 - 24 hours after surgery**. You will feel some tingling and return of movement as the nerve block wears off.
4. **If your limb is numb, protect it by always being careful where you place it**. You want to avoid burns, bruises, and cuts. Rest your limb on a pillow, and move it slightly every hour or two.
5. Areas of numbness or tingling and some muscle weakness are normal while the nerve block catheter is in place. You should notify your anesthesiologist if any numbness or weakness lasts for more than 12 hours after the catheter is removed.
6. The nerve block catheters are held in place by the dressing and tape on your skin. Please note that **excessive movement, pulling and rubbing can dislodge them**. If the catheters dislodge, they cannot be replaced. If the dressing looks like it is loosening, it can be re-taped. Avoid changing the dressing yourself as you might pull the catheter out by mistake.
7. Air bubbles in the tubing are harmless.
8. You may perform your physical therapy exercises as directed by your surgeon.
9. You may take a sponge bath only. Showering will dislodge the catheter.

Patient Label

10. Conditions to Call the Anesthesia Doctor about: Call 202-

- If you have an adverse reaction to the local anesthetic in the nerve block, such as confusion, incoherent speech, ringing in the ears, and/or tingling around the lips, **close the white clamp and call immediately.**
- A small amount of dark fluid around the nerve block catheter is normal. You may also see some clear fluid leaking around the catheter site and dressing. **If you see the pump or the tube leaking clear fluid, please call.** This situation can be corrected.
- Report any swelling or severe bruising at the nerve block catheter site.

Common Side Effects of the Interscalene Nerve Block Only: (Located at the base of the neck)

1. It is common to have some slight hoarseness; however, **difficulty talking or swallowing should be reported to your anesthesiologist.**
2. Some patients report feeling "closed-in" or somewhat winded, or cannot take a deep breath. These are normal; however, **if you cannot cough forcefully, or have difficulty breathing with chest pain, you should report this to your anesthesiologist immediately.**
3. It is normal to have a slight facial or eyelid droop on the side of your surgery while the catheter is in place.
4. Some patients complain of neck pain or stiffness. This will respond to oral pain medicine.
5. Mild swelling of your arm and hand is normal while the catheter is in place.

Patient Contact Information

**Anesthesia Doctor on Duty
202-**

Additional Instructions

Patient Signature

Date

Anesthesiologist

Date

Patient Label