

# My surgical companion



>CHANGE PAIN<sup>®</sup>  
*Taking care of pain*

# My surgical companion

Finding out that you need surgery can be scary. Often the path ahead can seem unclear, and finding more information can be difficult. This is where this brochure comes in. **It will help you to prepare for each stage of your surgical journey and to feel more comfortable about what is coming up.** It will also give you the tools you need to have effective conversations with your doctor and other members of your healthcare team. Knowing what to expect will help you to take control and play a more active role in your recovery.

For more information on the different stages of the journey, visit [mysurgicaljourney.com](https://mysurgicaljourney.com), and for an even more supportive experience, download the Ouch! app, your companion through your surgical journey.



# Surgery – the basics

## Why surgery?

There are many reasons you may need to have surgery:

- Perhaps you have a problem that can be treated by surgery, such as knee pain or a heart condition
- Maybe your doctor has discovered that there's something that needs removing, such as gallstones
- Or your doctor might want to explore or confirm a diagnosis through surgery, for example with a biopsy

Depending on the type of procedure you are having, you may be arriving and leaving the hospital or your doctor's practice on the same day, without needing to stay overnight (as an **outpatient**).

Alternatively, if you are having more extensive and invasive surgery, you will need to stay in the hospital as an **inpatient** after your procedure.

For more information on pain management, visit  
[mysurgicaljourney.com](https://www.mysurgicaljourney.com)



Did you know?

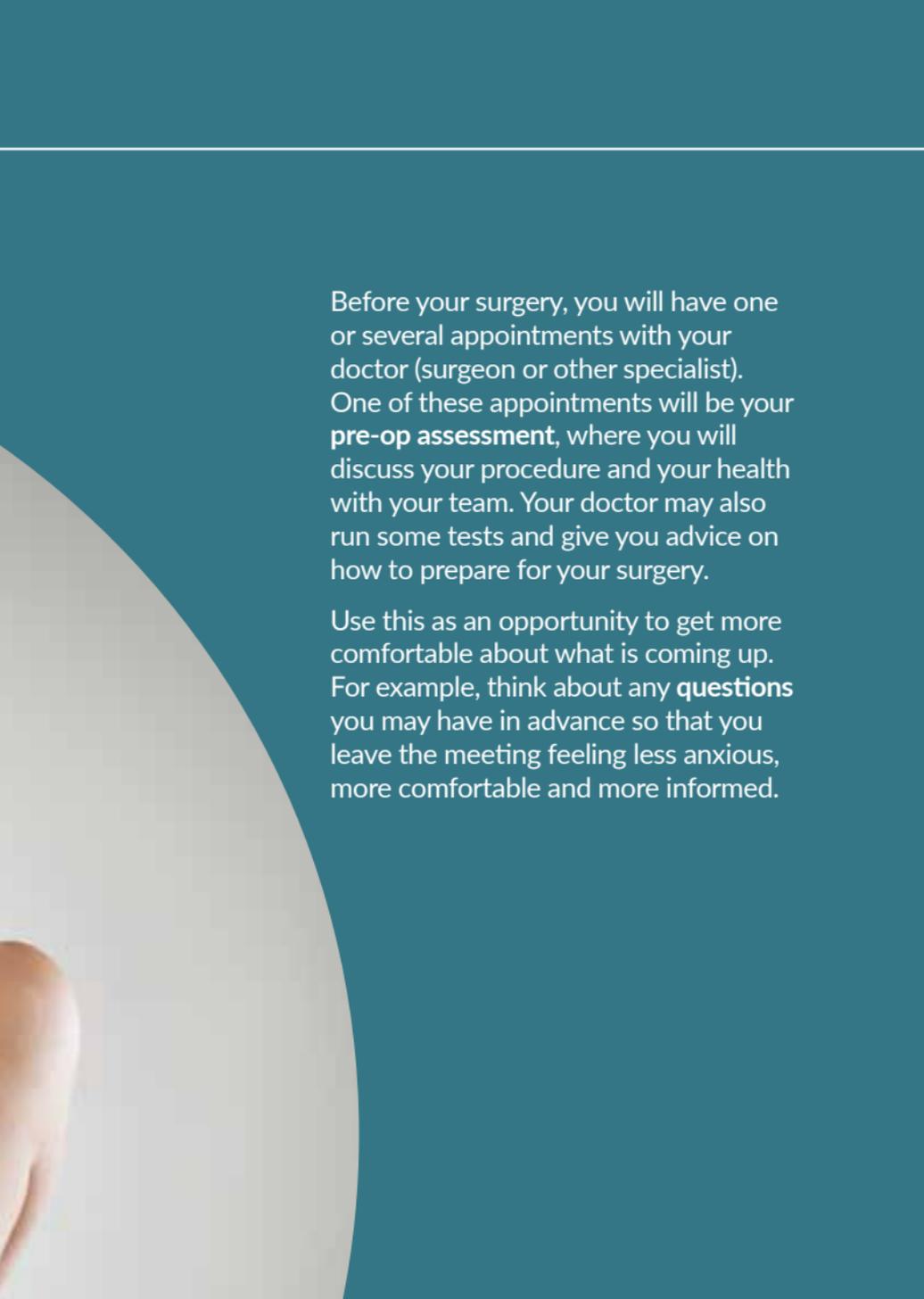
- You are not alone; an estimated **234 million** major surgical procedures take place every year worldwide.<sup>1</sup>
- In most cases, **your surgical team** will comprise your surgeon, your surgical nurse, your anaesthetist and your pharmacist.
- You are a **key member** of the team too! Patients who are involved in their treatment decisions, including their pain management, tend to be more satisfied with their surgery than those who don't.<sup>2,3</sup>
- Patients who are **in charge** of their pain management are more satisfied than patients whose pain relief is delivered by a member of their healthcare team.<sup>4</sup>



# Before your surgery

Your pre-op assessment





Before your surgery, you will have one or several appointments with your doctor (surgeon or other specialist). One of these appointments will be your **pre-op assessment**, where you will discuss your procedure and your health with your team. Your doctor may also run some tests and give you advice on how to prepare for your surgery.

Use this as an opportunity to get more comfortable about what is coming up. For example, think about any **questions** you may have in advance so that you leave the meeting feeling less anxious, more comfortable and more informed.

## Knowing how to manage your pain

You are likely to experience discomfort or pain after surgery; that's perfectly normal. It is often called post-operative pain or 'acute pain' – pain that is expected to last for only a limited amount of time.

**But don't worry, you have various medication options to help you manage acute pain:**

- Common painkillers
- Non-steroidal anti-inflammatory drugs (NSAIDs), which also stop inflammation
- Opioids, which are stronger painkillers and are only available by prescription

**There are also non-pharmaceutical options to tackle pain after surgery, including cold therapy and massage.**

These may be delivered in different ways and combinations. Make sure you start the conversation with your doctor (surgeon or other specialist) early to find the best option for your needs:

### Intravenous or subcutaneous analgesia

Delivered in the bloodstream or under the fat tissue.

### Intravenous patient-controlled analgesia

Here, you are in charge of when you receive your intravenous (iv) pain relief, called patient-controlled analgesia (or PCA).



### Epidural analgesia

Injected in the back (specifically the space that surrounds the spinal cord) to numb the nerves.

### Continuous infusion analgesia

Delivered directly to the surgical site or intravenously.

### Oral analgesia

Delivered as tablets.

### Sublingual patient-controlled analgesia

A recent innovation, whereby you are in charge of administering your pain relief, taking the tablets as and when you need them.

### Transdermal intophoretic analgesia

Delivered through the skin, without a needle, in the form of an electrical current.

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You can expect your healthcare team to take your pain seriously and work with you to manage it immediately after your surgery. In addition to helping you with your pain management, they will be asking you questions about your pain levels. For example, they might use what is commonly called a pain scale, asking you to rate your pain from 0 to 10.

For more information on pain management, visit  
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## Other questions you may have

The statements below will help you identify any questions you may have about your surgery to make sure you leave your pre-op assessment feeling informed and confident.

### The benefits and risks

- I know the benefits of having surgery.
- I am aware of potential risks.
- I have discussed alternatives to surgery with my doctor.
- I understand why I need to have surgery.

- I have discussed pain management options with my doctor.
- I am aware that pain relief may affect how I feel physically.

### The surgery

- I know what kind of surgery I am having
- I know my surgery date.
- I know whether I will need to stay in hospital after my surgery.
- I know what type of anaesthesia I will need.

### Pain management

Notes:

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## Setting your recovery milestones

After your surgery, you will want to get back to your normal life as quickly as possible. Speak with your doctor about how quickly you can expect to recover. Use the list below to set recovery milestones, and add more based on your own interests and requirements.



Get up from hospital bed unaided



Get up to go to the bathroom



Have a shower



Go home



Go for a walk



Return to work



Resume sexual activity



Drive

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Other milestones:



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# Your surgery

## Your surgical team

On the day of your surgery, you will be welcomed at the hospital by members of staff. You will also meet your surgical team, who will take you through what is coming up and ensure that your procedure is a success.

### Your surgical team will usually consist of:

#### Your surgeon

Who will be responsible for performing the surgery and who will be checking on your progress and recovery while you are in the ward.

#### Your nurses

Who will be monitoring your progress during surgery, in the recovery room and in the ward, and with whom you are likely to have the most interaction.

#### Your anaesthetist

Who will administer your anaesthesia and will monitor your vital signs during surgery and while you recover.

#### A clinical pharmacist

Who will consult on your medication.

Depending on the type of surgery you are having, you may meet other healthcare professionals, such as a physiotherapist.



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## How to prepare the day before

**Think back to your pre-op assessment and the advice your doctor gave you on how to prepare for your surgery. Check through the list below and tick each statement off as appropriate.**

- I have told the right people where I will be.

Notes:

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- I have arranged my transport (to and from the hospital).

Notes:

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- I have packed a small bag with the right things.

Notes:

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- I have remembered to take my medication with me.

Notes:

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- I have stopped eating in accordance with what I agreed with my doctor.

Notes:

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- I have stopped drinking in accordance with what I agreed with my doctor.

Notes:

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- I have made sure I have the right support at home.

Notes:

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## Your stay in the recovery room

After surgery, you will be moved to the recovery room – also called the post-anaesthesia care unit, or PACU – while you recover from anaesthesia. How long you stay here will depend on how quickly you wake up and the type of surgery you have had, but this will typically be between 1 and 3 hours.

Your nurses will be your key contacts here, taking care of you while you are in the recovery room, closely monitoring your vital signs, examining your surgical cuts and ensuring that you are receiving enough fluids. They will also administer your pain relief; alternatively, if you have selected to manage your pain with a method of patient-controlled analgesia, your nurses will show you how to use it here.

Make sure that you speak with your healthcare team if you are experiencing any pain and ask them any questions you may have.

For more information on pain management, visit  
[mysurgicaljourney.com](https://mysurgicaljourney.com)





# Your recovery

## Beginning your recovery



**Your recovery starts as soon as you move to the ward.** How long you stay here will depend on the type of surgery you've had and your speed of recovery. For example, as an **outpatient**, you are probably only going to spend a few hours in the ward until you are ready to go home.

Regardless, your nurses will be taking care of you again, carrying out tests and checks, administering your medications and liaising with your doctors. Monitoring your pain with the pain scale is also part of a normal stay in the ward.

**Remember to keep a record of your pain too using the tracker in this brochure.**

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## Questions for nurses

Your nurses will be taking care of you in the ward. Ask them any questions you may have and alert them if you have any pain. Check through the list below for suggestions on what you might want to know.

- I know when to go to the toilet on my own.
- I know whether I can have a shower.
- I know when to start eating and drinking.
- I know who to call when I am in pain.
- I know when my friends and family can visit.

Notes:

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**You are now ready to go home. But don't forget – it is important to take the necessary steps to ensure that you get back to your normal life as soon as possible.**

### My medication

- I know how to get a repeat prescription.

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- I know how many times a day I should take my medication.

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- I know when to stop taking my pain medication.

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- I know what to do if I experience side effects from my medication.

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### Who to contact

- I know who to contact if my pain is not being well controlled.

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- I know who to contact if I have a question about my recovery.

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- I know who to contact if I feel unwell.

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- I know when my follow-up appointment is.

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## Recovery plan and tips

Your recovery plan after leaving the hospital will depend on the type of surgery that you had. Use the space at the end to note the guidelines that you agreed with your doctor to ensure a speedy recovery.

### Here are some general tips to help you get back to normal faster:



Be as active as you agreed is appropriate with your doctor. Early mobilisation can help speed up recovery and reduce the risk of complications.<sup>1,2</sup>



Ensure that you follow a healthy diet to give your body enough nutrients to heal.



Try and get back to your regular routine based on what you agreed with your doctor and on your milestones.

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1. Tayrose G et al. *Bull Hosp Jt Dis.* 2013;71:222–226. 2. Pearse EO et al. *J Bone Joint Surg.* 2007;89:316–322.

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Recovery plan notes:

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## Follow-up visit tips

Your doctor (surgeon or other specialist) will schedule one or more follow-up appointments to check how well you are recovering. Here are some things you may wish to consider discussing in your appointments:

- **Look at your milestones.** Have you achieved them? Speak to your doctor about whether your recovery is on track.
- **Look at your pain tracking.** Are you still experiencing pain? Discuss with your doctor whether you need to make any changes to your recovery plan and pain management.
- **Do you have any other concerns?** Sharing them with your doctor is important to ensure that your recovery stays on track and that you have the support you need.



# Recording your pain

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Your nurses will be asking you questions about your pain levels, but you can take an active role here too.

## Pain severity

Use the chart to rate your pain from 0 to 10, where 0 is no pain at all and 10 is severe pain.



## Mood and sleep

Be sure to also keep an eye on your mood and your sleep after surgery, using the scale below to rate it.



good



neutral



bad

**If your pain is bothering you and affecting your sleep or mood, make sure you flag this to your healthcare team.**

Day	1	2	3	4	5	6	7
Pain at rest							
Pain with move-							
Mood							
Sleep							

Day	1	2	3	4	5	6	7
Pain at rest							
Pain with move-							
Mood							
Sleep							

Day	1	2	3	4	5	6	7
Pain at rest							
Pain with move-							
Mood							
Sleep							

Day	1	2	3	4	5	6	7
Pain at rest							
Pain with move-							
Mood							
Sleep							

# Recording your pain (continued)

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Sleep							

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Pain at rest							
Pain with move-							
Mood							
Sleep							

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