

# Pain Control After Reconstructive Surgery

## What to expect

*This handout is for patients who have had reconstructive surgery at University of Washington Medical Center (UWMC).*

## What to Expect

It is normal to have pain after surgery. As you recover, your pain should slowly ease. It may increase again when you resume activities.

Increase your activity level slowly, as your pain allows. As you increase your activity level, you may feel brief sharp or burning pain in areas. This is normal.



*Talk with your doctor or nurse if you have questions about pain control.*

## Pain Medicine

After surgery, you may use both non-prescription (over-the-counter) and prescription medicine to control pain. For instance, you might take:

- Acetaminophen (Tylenol and others), 650 mg by mouth every 6 hours
- One of these *nonsteroidal anti-inflammatory drugs (NSAIDs)\** starting the day after surgery (48 hours if the patient had mastectomy surgery):
  - Ibuprofen (Advil, Motrin, others), 400 mg to 600 mg every 6 hours, as needed with food
  - Naproxen (Naprosyn, Aleve, others), 220 mg to 500 mg twice a day, as needed with food
- *Opioid* pain medicine as prescribed, for severe pain: oxycodone (Percocet), hydrocodone (Vicodin), or hydromorphone (Dilaudid)

**\* Important:** Do **not** take NSAIDs if you have:

- Kidney disease or severe liver disease
- Had gastric bypass surgery
- A history of stomach ulcers, intestinal bleeding, heart attack, or stroke
- Allergies to NSAIDs

## About Opioid Pain Medicine

You will be given a supply of opioid pain medicine when you leave the hospital. This should be enough to last until your next clinic visit (usually 2 to 3 weeks after surgery). Many patients can reduce or stop taking opioids by their first clinic visit.

Here are some things you should know about opioids:

- Take opioids only for severe pain. It is OK to take them with your non-prescription pain medicine.
- Opioids may be addictive, so use this medicine for only a short time.
- You may have side effects such as nausea, itching, and constipation.
- Opioids can affect your thinking. While you are taking opioids, do **not**:
  - Drive, travel by yourself, or use machinery
  - Be responsible for caring for another person
  - Sign legal papers or make important decisions
  - Drink alcohol or take street drugs

We may refer you to UWMC's Peri-op Pain Clinic for help controlling your pain if you:

- Take opioid pain medicine for chronic pain
- Have a history of addiction
- Have trouble tapering off your pain medicine on your own

## Reducing Your Opioid Use

Start reducing your use of opioids within 1 week after surgery. This is called *tapering*. To taper your opioids, you can:

- Take fewer pills at each dose (you might take 1 pill at each dose instead of 2 pills). It is OK to split pills, if needed.
- Spread your doses farther apart (you might take them every 6 hours instead of every 4 hours).
- Try taking the opioids only at night to help you get restful sleep. Use the over-the-counter medicines during the day.

## Withdrawal

If you are taking a high dose of opioids and stop suddenly, you may have withdrawal symptoms. These symptoms are not life-threatening, but they can be uncomfortable.

Tapering your medicine can help reduce withdrawal symptoms. These symptoms include:

- Nausea
- Shaking
- Dizziness
- Fast heartbeat
- Sweating

### **Refills of Opioids**

Many patients do not need a refill of their opioid medicine. If you think you need a refill:

- Call the clinic with your request 2 business days before you are out of medicine.
- Opioid prescriptions cannot be faxed, phoned in, or e-faxed. You must bring ID and pick up your prescription in person at our clinic, or ask us to mail the prescription to the home address we have on file for you.

### **Safely Dispose of Opioids**

It is important to safely dispose of any extra opioid pills so that they cannot be taken by mistake or misused.

Call your local police or sheriff to find out what to do with any extra opioid medicine you no longer need. To find the phone number and hours, visit [www.takebackyourmeds.org/what-you-can-do/locations](http://www.takebackyourmeds.org/what-you-can-do/locations).

### **When to Call the Clinic**

Call the clinic and talk with a nurse if you:

- Need help controlling your pain or tapering your opioid pain medicine
- Have any of these signs of infection:
  - Increased pain that was under control
  - New swelling, redness, or drainage around your incisions
  - Fever higher than 100.5 °F (38.1 °C) or chills
  - Increased fatigue
  - Nausea

### **Who to Call**

- To talk with a nurse weekdays from 8 a.m. to 5 p.m., call 206.598.1217.
- If you have an urgent concern after hours or on weekends or a holiday, call 206.598.6190 and ask for the Plastic Surgery Resident on call to be paged.

### **Questions?**

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Weekdays from 8 a.m. to 5 p.m., call the Center for Reconstructive Surgery at 206.598.1217, and press 8.

After hours and on weekends and holidays, call 206.598.6190 and ask for the resident on call for your surgeon to be paged.