

About the pain service

We understand that coming to hospital for an operation can be a very stressful time for you and your family. One of the things that patients often worry about is pain.

The pain service was set up in 1996, and the team comprises, two consultant anaesthetists, a clinical nurse specialist and two staff nurses for pain (one for adult and one for paediatric pain), a pharmacist for your ward and the 'on-call' specialist registrar in anaesthetics.

The role of the pain service is to:

- take responsibility for the day-to-day management of acute pain after surgery or injury and help to manage more complex pain problems where possible
- provide training for medical and nursing staff involved in the management of post-operative and post injury pain
- support the ward nurses who have the key role in the management of post-operative pain, to assist in the management of more complex pain issues within the guidelines for acute pain teams

After your operation or during your treatment

There are various methods of controlling pain after surgery. Your anaesthetist will discuss this with you in more detail as not all methods are suitable for all types of surgery. If you have any preferences, please mention these to the anaesthetist when he or she visits you.

We aim to ensure your pain is as well-managed as possible, and that any side-effects are dealt with appropriately. If you have been given an epidural or analgesic infusion, or patient-controlled analgesia (PCA), or are experiencing difficulty with pain, the pain team will monitor your pain on a daily basis.

Pain assessment

There are many ways in which we can help. One of them is to try to understand how you are feeling. We do this by pain assessment.

Pain is a very individual thing. No two people will feel the same, even if they have had the same operation. Only you know how you are feeling. It is easier for us to understand your pain by using a pain assessment tool. The tool that we use is called a categorical rating scale. The ward nurse will ask you how you are feeling when you take a deep breath or when you move. It is up to you to decide how to describe your pain. Is it?

0 = no pain

1 = mild pain

2 = moderate pain

3 = severe pain

Each category coincides with a number. Your nurse will record your answer and will act on the result. Other pain tools may be used such as a 1-10 scale or more specialised tools for children. The tool should be easy for you to understand and for staff to be able to assess your pain according to the category above.

You do not have to wait to be asked about your pain to have pain relief. If you are uncomfortable, tell your nurse. We want you to be comfortable. It is much easier to get rid of pain before it becomes very uncomfortable.

Some commonly asked questions

I don't like taking pain killers. Can I just put up with the pain?

This is not a good idea. It is extremely important for you to have good pain relief, as it will enable you to get up and about after your operation and co-operate with the physiotherapist, depending on the type of surgery you have had. This in turn reduces the risk of complications associated with surgery, such as chest infections and pressure sores.

Good pain relief will also allow you to get the rest you need to allow wound healing to take place. Many people find they can reduce or stop their pain killers around three to five days after surgery.

Isn't severe pain only to be expected after a major operation?

No, you should not expect to be in a lot of pain after any type of surgery. When you are resting quietly in bed after your operation you should have either no pain or only a mild form of discomfort. It is also important for you to be able to do your breathing exercises after your operation. Your pain should be sufficiently well controlled so that you are able to do this.

What if I feel sick?

This affects some people more than others. Some of the strong painkillers that we use can cause nausea and vomiting. However, we can often prevent this by giving anti-sickness medication. If you do feel sick, tell your nurse, so that he or she can take some action. It is better to treat the nausea, rather than waiting until you vomit.

Further questions

If you have any other questions about the management of your pain, the specialist nurse in pain management can usually be contacted by the ward nurses during office hours.

Clinical nurse specialist

Tel: 01342 414533

Please ask if you would like this leaflet in larger print or a different format.

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