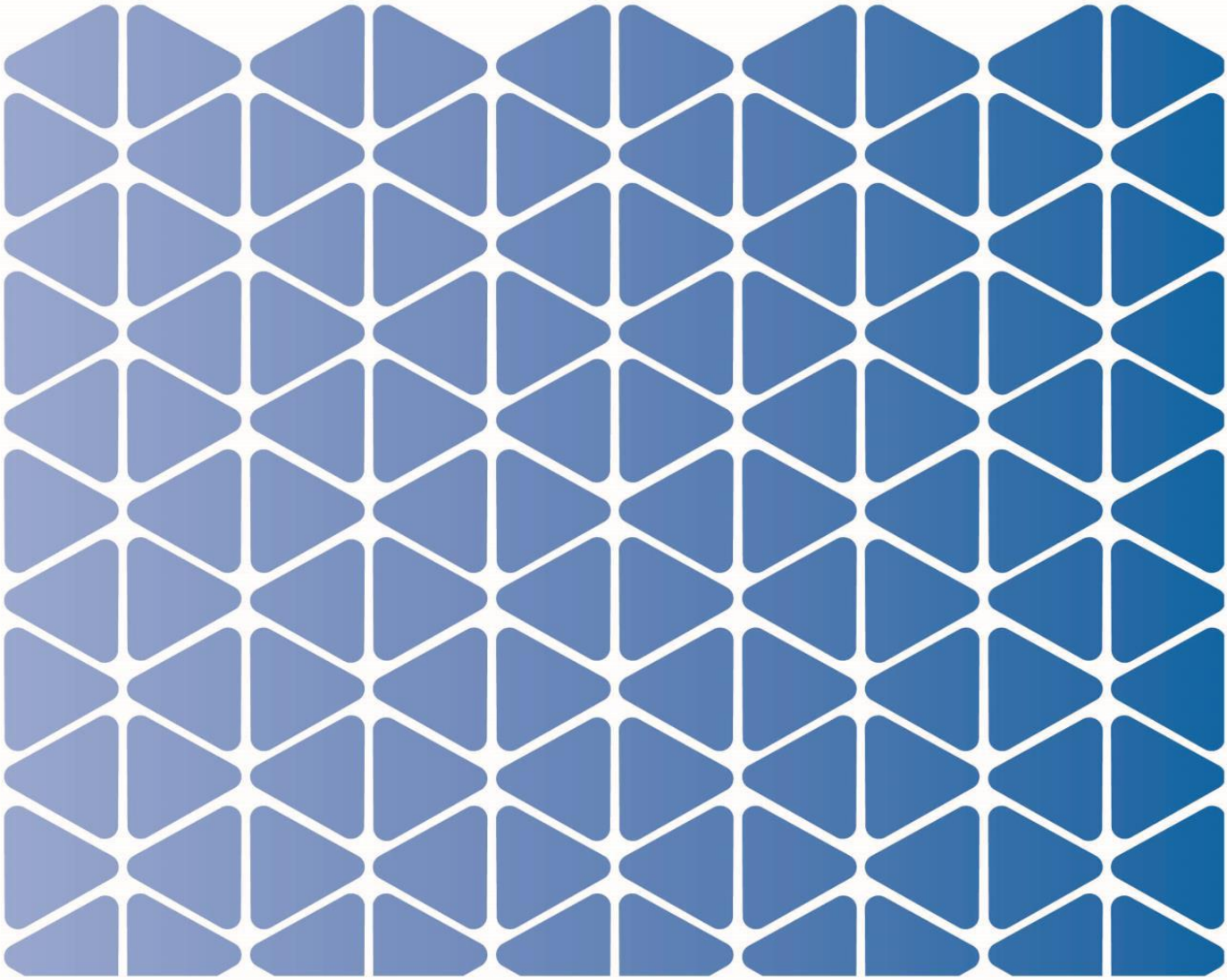
PATIENT INFORMATION

ACUTE PAIN INFORMATION LEAFLET

and patient Satisfaction Questions



INTRODUCTION

When you are admitted into hospital for an operation or due to illness, it is possible that one of your questions will be 'will it hurt'?

It is impossible to tell whether or not you will experience any pain. However, if you do, we will treat you as soon as possible to ensure you are comfortable.

Pain relief is important as it alleviates distress and helps you recover more quickly.

WHAT IS PAIN?

Pain is an individual experience and no two people will feel the same level of pain in similar situations.

What is MOST important is that you tell someone you are in pain; you should not wait until the drug trolley comes round. You will be asked where your pain is and what it is like using the scale shown below. This should be done when you are resting and when deep breathing/coughing.

No Pain

Mild Pain

Moderate Pain

Severe Pain

HOW WILL WE TREAT YOUR PAIN

There are many ways of treating pain and we will try to find one that is most suitable for you. The most common being;

Taken by Mouth: e.g. tablets, liquids.

Suppositories: This involves giving the pain relieving medicine via the back passage (it doesn't act as a laxative and will not make you go to the toilet).

On occasions you may need a more technical form of pain relief, this will be explained by your anaesthetist, who will help you find the most suitable and discuss any risks involved, and after your operation you will meet the Acute Pain Team

Further information not on this leaflet can be found on www.fpm.ac.uk

Acute Pain Team

WORCESTERSHIRE ROYAL HOSPITAL
Direct line: 01905 760557
Internal **extension:** 30725
Bleep: 238 (Mon to Fri, 8 - 4pm)

ALEXANDRA HOSPITAL, REDDITCH
Direct line: 01527 503030
Internal **extension:** 44037
Bleep: 1266 (Mon to Fri, 8 – 4pm)

Patient Controlled analgesia (PCA): with this method you are connected to a pump which contains the pain relieving drug, and will be given a special button/lever, which you can press whenever you are in pain (Must ONLY be pressed by the PATIENT). However, the pump will not let you give yourself too much medicine but makes enough available for when you need it. Side effects can include itching/nausea but will be managed accordingly.

Epidural: With this a small plastic tube is inserted close to your spine by your anaesthetist. This allows continuous administration of pain relieving drugs after your operation. Temporary numbness and weakness of the legs is common while the epidural is in progress, but will stop once the epidural is stopped.
This may be in place for a few days and you will be monitored appropriately.

Spinals: these provide similar pain relief to epidurals but wear off soon after the operation, within a few hours.

Peripheral Nerve Blockade: provide pain relief of similar quality to epidurals but to a more localised area.

Rectus Sheath Catheters: Rectus Sheath Catheters are thin tubes inserted into your abdominal wall and are used for pain management following abdominal surgery, where the use of epidural catheters may sometimes be contraindicated. The rectus sheath catheters (x2) are inserted during surgery by the surgeon or anaesthetist one each side to cover the wound and will be topped up with pain medicine every 6 hours by nurses on the ward.

Continuous infusions: With this method you are connected to a pump which will deliver the pain relieving medicine. It is given slowly and continuously. The nurses can adjust the rate to make sure you are comfortable and ensure any side effects are treated.

Patient Experience
We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback
Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)
If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:
The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.

Further information not on this leaflet can be found on www.fpm.ac.uk

PATIENT SATISFACTION QUESTIONNAIRE

(Please circle answer or add comments as appropriate)

MONTH:……

- Were you asked by a member of staff if you had any pain at least once a shift e.g. during the day or overnight?

  YES/NO

- Did you feel it was easy to tell someone if you had any pain?

  YES/NO

- Were you encouraged to report pain or take analgesia?

  YES/NO

- Which of these methods did you have?

  EPIDURAL/PCA/RECTUS SHEATH CATHETERS/PERIPHERAL NERVE CATH or ORAL

- Whilst you had your PCA, Epidural, Rectus Sheath Catheters or Peripheral Nerve Catheter did you feel your pain was well managed?

  YES/NO/SOME OF THE TIME

- Were you satisfied with the change from PCA, Epidural, Rectus Sheath Catheters, Peripheral Nerve Catheter to oral analgesia?

  YES/NO

  If No, what happened?

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  .....

- Overall how satisfied were you with your experience whilst you were under the care of the Acute (Peri-operative) Pain Team?

  Good/Borderline/Unsatisfactory/Not applicable

Continued over…..

Please provide further comments, which may help us improve the service:

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PLEASE TEAR THIS PAGE OFF AND RETURN: either to a member of the Acute Pain Team or Ward Staff.

or FORWARD YOUR ANSWERS TO: wah-tr.acuteperioppainteam@nhs.net

or use the QR code below