

Horton Day Case Unit

# Information and advice after a local anaesthetic procedure Information for patients



# Information and advice after a local anaesthetic

Today you have had a surgical procedure under local anaesthetic. This means that the skin or tissue in the area of your operation has been numbed to allow surgery to take place.

## How you will feel

- The area may feel swollen or tight.
- Local anaesthetic works by blocking the way nerves carry pain signals to the brain. As the local anaesthetic wears off you may find that you have a tingling or burning sensation. The length of time that the local anaesthetic takes to wear off depends on what type of anaesthetic was used. It usually lasts for approximately 4 - 6 hours. During this period take care not to injure the area which has been numbed as you may not feel any damage.
- The local anaesthetic may also have contained adrenaline.
   Adrenaline makes the surrounding blood vessels smaller. The
   area may have a blanched appearance (look lighter in colour).
   As the anaesthetic wears off the normal skin colour will come
   back.
- A small amount of bleeding into the dressing is normal.
- As the local anaesthetic wears off you may find that you need to take other pain relief.

# Pain relief at home – a guide to your painkillers and how to take them

You may take a combination of different pain killers after your surgery. Each type of painkiller works in a different way to help relieve your pain. The types of painkiller are:

- Paracetamol
- An anti-inflammatory, for example, Diclofenac or Ibuprofen
- A morphine based painkiller, for example, Codeine Phosphate, Tramadol (only prescribed by a doctor).

It is safe to take the different types of painkiller together or at different times of the day. The following section will help you choose which painkiller to take according to the severity of the pain.

#### Mild Pain

Take your paracetamol regularly as prescribed on the prescription label. Do not take more than 8 tablets in 24 hours.

#### Moderate pain

Take your paracetamol regularly, and also your anti-inflammatory painkiller as described on the prescription label.

If you have not been prescribed an anti-inflammatory painkiller, take your morphine based painkiller as described on the prescription label, together with your paracetamol.

You may find that you only need to take the morphine based painkiller once or twice during the day.

It is advisable to take 30mg (1 tablet) of codeine at first. If the pain settles then there is no need to take any more. If the pain does not settle then a further 30mg (1 tablet) may be taken. Do not take more than 8 tablets in 24 hours.

#### Severe pain

Take all your painkillers on a regular basis as described on the prescription labels. It may be of benefit to take your paracetamol and morphine based ones together and to take the anti-inflammatory ones 2-3 hours later.

- The morphine based painkiller may cause constipation. If this happens, drink plenty of fluids and increase your intake of dietary fibre.
- The anti-inflammatory painkiller may cause stomach irritation and should be taken with or after food.

Pain relief:	Next due at
Paracetamol	
lbuprofen	
Codeine phosphate	
Other	

## How long will I need to take my painkillers?

As healing occurs you will feel less pain. Once your pain is controlled and is mild, you should only take paracetamol. If your pain remains severe for more than a few days or is not relieved by your painkillers, you should contact your GP.

Never give prescribed tablets to other people as they may not be safe for them to take. Any left over painkillers should be taken to your local pharmacy for safe disposal.

Keep all medicines out of the reach of children.

### Follow up

A follow up appointment is not always needed. If the doctor has asked to see you again you will receive an appointment letter in the post.

Fol	low	up	ap	p	oir	٦tr	n	er	ıt	n	ot	r	ne	ec	de	d	/	ne	ee	d	ec	b						
for																							 	 	 	 	 	

#### How to contact us

If you have any problems within the next 24 hours such as:

- New / fresh or increasing bleeding.
- Pain that is not controlled with painkillers

please contact your GP or go to your nearest A & E department.

All **gynaecology patients** should contact their nearest gynaecology in-patient ward if they have any problems over the next 72 hours.

Alternatively, if you would like to speak to one of our nurses, please call:

E ward (24hrs) Horton	01295 229216
Gynaecology ward (24hrs) Horton	01295 229088
Day Case (9am - 5pm) Horton	01295 229383
Gynaecology in-patient ward JR Oxford	01865 222001 / 2

If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@orh.nhs.uk** 

Lynne Beeson, Sister, Horton Day Case Unit Sharon Wells Acute Pain Service Version 3, August 2011 Review, August 2014 Oxford Radcliffe Hospitals NHS Trust Oxford OX3 9DU www.oxfordradcliffe.nhs.uk/patientinformation