PATIENT INFORMATION



DISCHARGE INSTRUCTIONS

YOU MAY EXPERIENCE THE FOLLOWING <u>TEMPORARY</u> SIDE-EFFECTS FOR 2-6 HOURS:

- 1. Weakness, numbness and/or paralysis of the involved extremities.
- 2. Dizziness or feeling faint may occur upon abruptly sitting up or standing up for several hours after blocks.
- 3. Nausea and vomiting can occur at any time especially traveling home.
- 4. Please ask for medication and/or sick bag if needed.
- 5. Please notify your doctor if these symptoms persist longer than expected or return after discharge.

GENERAL INSTRUCTIONS FOR ALL PROCEDURES

- 1. Avoid strenuous exercise while 'numb' and then gradually increase range of normal activity.
- 2. You may eat and drink when you feel like it after the procedure, start with clear liquids and progress as tolerated to a light meal and to normal after 12-24 hours.
- 3. Report fevers >38°C, unexpected redness or severe pain, new unexpected numbness or weakness.
- 4. Apply ice to painful areas for 15-30 minutes per 4 hours for 24 to 48 hours.
- 5. Use 1g paracetamol 4-6 hourly, 50mg Tramadol 6hourly for 24-48h, if needed for procedural pain.
 - You may be sore after a stimulator or pump implant and need morphine-like analgesics for 2-3 days.
- 6. Protect and support the affected area if weakness or paralysis occurs.
- 7. Keep any dressing dry, clean and in place until instructed by your doctor to remove them.
- 8. You must have someone else drive you to and from hospital and preferably stay with you for at least 4 hours afterwards.
 - You can expect to be picked up 1-4 hour after the treatment depending upon the procedure.
- 9. **Do not** drive a car, operate machinery, drink alcohol or make important decisions for 12 hours
- 10. Please make a review appointment 2 -4 weeks after the injection. Please advise ASAP if you are unable to keep your scheduled appointment.

SUPPLEMENTARY DISCHARGE INSTRUCTIONS

DIAGNOSTIC PROCEDURES

- 1. The "Diagnostic Block Evaluation Sheet" is an important document. Please send a copy to the clinic in 3 days.
 - by fax: 03 9770 0944,
 - by email: info@fpmx.com.au,
 - by post to Frankston Pain Management, 7/20 Clarendon Street, Frankston 3199 or

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• Keep a copy for your records. Please bring the completed form with extended pain scores to your follow-up consultation.

While completing the "Diagnostic Block Evaluation Sheet" please ignore injection site soreness and try to identify any component of your usual pain that changes.

When your "Diagnostic Block Evaluation Sheet" has been assessed (within 5 days of receipt) you will be notified of the next step. You may telephone the office after this time if you have not heard from us.

SPINAL CORD AND PERIPHERAL NERVE STIMULATOR

Please read the SCS Discharge Instruction or PNS/ONS Discharge Instruction sheet depending on procedure.

DRUG PUMPS

Please read the Spinal Drug Pump Discharge Instruction sheet

EMERGENCY CONTACT

If you have any questions, concerns or problems, call (03) 9770 0522 during office hours. For after hours' emergencies, make your way to the nearest Hospital Emergency Department. Should you be unable to contact our clinic, please call your local doctor or if the problem is urgent attend the nearest Hospital Emergency Department.