Managing Your Child’s Pain at Home After Surgery

Key Points

- Maintaining a steady level of medicine is the best way to keep pain under control.
- Give a full dose of pain-relief medicine about one hour before your child has his or her cast removed.

Children usually need pain-relief medicine during the first days or weeks after surgery. The length of time children need medicine and the type of medicine required depends on the type of surgery they’ve had and their pain tolerance. For example, if children are experiencing minor pain, they might need mild pain-relief medicine, such as acetaminophen (Tylenol©) or, if prescribed by your doctor, ibuprofen (Motrin© or another brand). Other patients need a stronger medicine, as prescribed by a doctor.

**How can I prevent my child from having pain?**

Pain-relief medicine works best when it’s given as scheduled, usually every four or five hours. If your child experiences serious pain, which requires medicine more than five times a day, please call your clinic nurse.

Pain may increase during sleep, so rather than waiting for children to wake up, we advise waking them to give scheduled medicine.

Maintaining a steady level of medicine is the best way to keep pain under control. Once pain becomes severe, it can be hard to regain control of it.

**How can I make my child more comfortable for the trip home?**

About one hour before leaving the hospital, give your child a full dose of pain-relief medicine. If you have a long drive and pain-relief is needed, give medicine as prescribed during the trip. You also might want to stop often and reposition your child. Repositioning promotes good circulation and ensures comfort. Be sure to use seat belts!

**How can I tell if my child needs pain-relief medicine?**

Below are just some of the things that indicate a child is in pain, but you know your child best. If you think your child is in pain, you’re probably right. Your child might have all or some of the following responses to pain after surgery:

- Crying, screaming and/or moaning
- Complaining of pain
- Irritable, whiny, crabby or negative behavior
- Inconsolability (can’t be calmed)
- Major change in usual behavior, (e.g., an active child is quiet or withdrawn)
- Inability to sleep or very restless, fitful sleep
• Big change in appetite, poor intake of food or liquids
• Cannot be distracted from pain
• Change in muscle tone, usually with increase in muscle tightness or spasms
• Inability to find a comfortable position
• Holds very still, seems to guard against touching or moving areas of the body that had surgery
• Unwilling to play or take part in routine or favorite activities

What are some of the things that can make my child’s pain increase?
• Swelling
• Activity that has caused soreness or stiffness
• Distress, fear or anxiety
• Infection
• Poor sleep, exhaustion

What can I do if my child is having pain?
• Give another dose of pain-relief medicine if enough time has passed since the last dose.
• If the pain is worse than usual, check to see if anything is wrong, using the checklist above.
• If your child is not already using it, give stronger pain-relief medicine, if prescribed, at the next dose. Give the strong medicine instead of the other pain-relief medicine, NOT in addition to it.
• Give the full amount of medicine, but no more than the prescribed dose.

What other methods can I use that will help relieve my child’s pain?
• Distract your child with music, stories, TV, video games, etc.
• Massage or use soothing touch on areas of your child's body that are pain-free.
• If possible, raise the part of the body that had surgery above your child’s heart by a few inches. This will help reduce swelling and improve blood circulation.
• Use ice packs for 15 minutes at a time with 30 minutes in between applications. Put a cloth in between the ice and skin to keep the skin from becoming too cold. Be sure to keep the cast dry.
• Encourage relaxation with slow deep breathing or guided imagery of a peaceful time. Relaxing can help lower muscle tension and promote comfort.

What can I do for my child’s cast change and removal?
• Give a full dose of pain-relief medicine about one hour before cast removal. Your child will experience some discomfort when the cast comes off. Bring your child’s pain-relief medicine on cast removal day so, if needed, you can give another dose of medicine.

• Stay with and reassure your child during the procedure.

• Reassure your child that even though the cast saw is noisy and scary, it’s a safe way to take off the cast. The saw vibrates only through the cast and not the skin.

• Swelling can continue for some time after casts are removed. Continue to elevate the arm or leg after the cast has come off.

How can I take my child off pain-relief medicine?

Once your child becomes more comfortable, usually a few days after coming home from surgery, you can gradually change from strong pain-relief medicine to a milder one. One good way to do this is to use substitute plain Tylenol for stronger pain-relief medicine. This is best done during the daytime.

If your child manages, you may continue to give Tylenol. If your child is more uncomfortable at night, use the stronger pain-relief medicine. Pain should decrease every day after surgery and eventually you can stop giving even Tylenol.

How can I help my child get better every day?

Anticipate any big changes in your child’s activity that might result in soreness from overuse. Give your child pain-relief medicine about one hour before doing exercises, standing or walking. It’s better to give pain-relief medicine and encourage activity than to limit your child’s activities.

• Increase your child’s activity gradually every day. If your child starts feeling less pain and becomes too active too soon, it may cause an increase in pain.

• Continue to elevate your child’s legs or arms that had surgery, since normal circulation will be weakened for some time.
Call Telehealth Nursing (651-229-3890) if:

- For no apparent reason, your child’s pain becomes severe after a fairly long period of comfort.
- Your child’s pain gets worse and there is new redness, swelling or thick drainage in the area of surgery.
- The location of pain changes for a reason other than normal activities or normal bumps or bruises.
- Your child has pain in an area covered by the cast, but not in the area of surgery. Sometimes casts can cause pressure in bony areas, such as anklebones, heels or the tailbone.
- Your child’s pain becomes severe and finds no relief from the methods discussed here. You may need to give two or three doses of pain-relief medicine, about four hours apart, to control the pain. Once pain becomes severe, it’s best to combine other pain-relief methods, listed above, to get pain under control. However, DO NOT give more than one dose of the same pain-relief medicine at a time.

A Warning About Pain-Relief Medicines

Many common over-the-counter medicines contain acetaminophen. Always read labels to prevent giving too much of the drug. Limit acetaminophen to five doses in 24 hours. Do not give ibuprofen unless your doctor approved it for use after surgery.

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