

PATIENT INFORMATION

Regional Anaesthesia Discharge Information



Recovering from a Regional Anaesthesia

Regional anaesthesia involves injection(s) of local anaesthetic to block certain nerves or groups of nerves in order to 'numb 'a part of your body. The effects of the regional anaesthetic should gradually wear off within 24 hours.

While your affected limb is weak or numb you must take care to protect it – consider using a sling or splint to support it and take care to avoid any pressure areas, sources of heat or cold.

Rarely, serious complications can occur following nerve block injections. Therefore, please seek medical advice from your local hospital using the telephone number provided if:

- The effect of the nerve block is lasting LONGER than expected (more than 48 hours after a nerve block injection)
- You experience NEW ONSET neurological deficits after your original nerve block has worn off (numbness/tingling, weakness, unexplained excessive pain)

Whilst recovering from regional anaesthesia please ensure you:

- Drink fluid and eat a light diet
- Take any prescribed medication
- Follow wound care instructions given by your discharging nurse
- Take it easy on the day of the operation, longer if recommended
- Take time off work if advised to do so

Medication

Please continue your regular medication unless advised otherwise by your nurse or doctor.

Most surgical wounds will cause some discomfort initially and this may last for a few days. Paracetamol and/or Ibuprofen if appropriate is usually sufficient to manage any pain you may experience; these medicines can be obtained over the counter from your local pharmacy or supermarket. It is important that you take regular pain relief medication at the prescribed times because as the block begins to wear off feelings of pain can return quickly. This also ensures that you maintain a constant level of pain relief rather than fluctuating between no pain and increased pain. Regular use of simple analgesia significantly reduces the amount of opioid type pain medication (such as codeine) you might need which in turn reduces the side effects one can experience from these stronger medicines.

If your doctors think that you will require extra pain relief or additional medications to aid your recovery, these will have been given to you by your discharging nurse. Please take all medicines as directed and take care not to exceed the recommended dose. You will be discharged home from the hospital with sufficient prescription only medications for a few days. Thereafter, you will need to obtain a repeat prescription from your GP surgery should you require these for longer than the normal expected duration.

Medication	Last Dose	Next Dose

Wound Care

Your wound has been closed with	Glue / absorbable / non-absorbable sutures
Your dressing is	Waterproof / not waterproof
Date to remove dressing	
Date to remove sutures	
Wound care instructions	
Drain instructions	

- Glue/Dissolvable Stitches - These do not need to be removed and will dissolve in 10-14 days.
- Non-dissolvable Stitches -These will need to be removed at your GP practice by the practice nurse or at a follow up appointment with a member of the surgical team.

All wounds are covered with a surgical dressing to keep the wound clean and prevent infection. Please keep your wound dry for 24 to 48 hours, unless otherwise informed by your discharging nurse. After this time, you may shower or bathe but do not soak in the bath for long periods. After showering/bathing, remove any wet dressing and pat the wound dry (do not rub the wound). Following your bath or shower you can either leave the wound exposed, or if it is rubbing on your clothes, apply a new dressing.

If your wound starts to bleed, apply pressure with a clean dressing, towel or cloth for 15 minutes. If this does not stop the bleeding or you have any signs of infection, please seek advice from your local hospital or attend your nearest walk in centre/emergency department.

Signs that your wound may be infected:

- The skin around your wound is red, sore, hot and swollen
- Your wound has liquid (often green or yellow pus) coming out of it
- You feel generally unwell or have a temperature

Mobility

It is advised for you to mobilise as much as you are able.

You will be informed of any restrictions or instructions regarding your mobility prior to discharge.

If you have been advised to wear compression stockings, please follow the instructions given to you by your discharging Nurse.

Please wear your anti embolic stockings **day/night** for **weeks/months**.

Prevention of DVT and PE

When you have recently been discharged from hospital after surgery you are at more risk of developing blood clots that can form in your body. They are commonly known as a Deep Vein Thrombosis (DVT) or Pulmonary Embolism (PE)

- DVT commonly presents with a swollen and painful leg. The leg can also be red and warm to touch. It rarely affects both legs.
- PE commonly presents with chest pain which is often worse when taking a deep breath. It can also cause shortness of breath, a fast heart rate and coughing up blood.

You should seek urgent medical attention from your GP or local emergency department if you have any of these symptoms. If you are unwell you should call 111 or 999 in an emergency.

Follow up appointment

You **do/do not** need to see the consultant or their team again.

This appointment will be sent to you in the post for.....**weeks/months**.

If you have had a **biopsy** taken, you will receive a written letter with the results.

Advice MUST be sought if you have any of the following symptoms following your surgery.

- Bleeding from wound site which is more than expected.
- Swelling or discolouration of the skin around your wound.
- Swelling in any limbs, especially if it is hot to touch.
- Shortness of breath.
- Chest pain.

If you experience any of the above symptoms, please call 111 or attend your nearest accident and emergency.

You can also contact Ward One on :01562 826350 / 01562 512356 Monday to Friday 24 hours a day.

If you require speciality advice, or need advice outside of Ward One hours, you can also contact:

General/Urology Surgery - Ward 18 (Alexandra Hospital)- 01527 512106

Orthopaedic Surgery - Ward 16 (Alexandra Hospital)- 01527 512104

Emergency Gynaecology Assessment Unit (WRH) - 01905 761489

Ophthalmology (Eyes) - 01527 507915 (09:00- 17:00) OR 111

Eye patients can also contact **Birmingham Eye Hospital** for advice on 0121 507 4440

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Alexandra Hospital, Redditch (Hospital switchboard 01527 503030)

- Working hours (8am-4pm, Monday-Friday); Telephone the hospital switch board and ask them to bleep the Acute Pain Nurse (Bleep number 1266)
- Outside of these hours please contact Worcestershire Royal Hospital as below

Worcestershire Royal Hospital, Worcester (Hospital switchboard 10905 763333)

- Working hours (8am-4pm, Monday-Friday); Telephone the hospital switch board and ask them to bleep the Acute Pain Nurse (Bleep number 238)

Patient Experience and Feedback

We know that being admitted to hospital can be a difficult and unsettling time for you and your family. 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 any questions you may have and reassure you.

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 also ask that you complete a short patient experience questionnaire following your regional anaesthesia. We value your comments and feedback and thank you for taking the time to share this with us.

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

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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.