How to Manage a Nerve Block Infusion at Home
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Pain control is an important part of recovery after surgery. You will be discharged from the hospital with a nerve block attached to a pump filled with pain medicine. This guide explains this type of pain control.

We want to provide you with safe, effective pain control from the comfort of your home.

What is a nerve block?

• A nerve block is medicine given by an anesthetist to numb the nerves which go to the surgery site. An anesthetist is a doctor who gives medicine to put you to sleep or “freezes” a part of your body so you don’t feel pain. The numbing medicine blocks the pain signals from nerves in the surgery site from reaching your brain. The numbing medicine is called local anesthetic. This is similar to the medicine a dentist uses to numb your mouth.

• The nerve block will cause numbness of the surgery site for about 2 days after your surgery.
How does the pump work?

• Before surgery, a catheter (small tube) will be inserted (put in) close to the nerve by an anesthesiologist. It will be held in place by small pieces of tape and a clear plastic dressing.

• The tube is attached to a pump filled with numbing medicine. The numbing medicine will flow from the pump, through the tubing, to your nerve. This flow of medicine is called the infusion.

• The pump can hold enough medicine to last for about 2 days.

What do I need to know about the pump?

• The pump does not need to be plugged in. It works with your normal body heat.

• You cannot accidentally change the program.

• Do not put ice packs, heating pads, or hot water bottles on your nerve block dressing.

• Make sure the tubing attached to the pump is not stretched or kinked (bent).

• If the tubing comes away from the pump, call the Acute Pain Service doctor at 902-222-1938.
What do I do if the tubing pulls out of my skin?

• The tubing may pull out of your skin if the dressing gets loose or you move your arm or leg too much. In this case, the numbing medicine will no longer reach the nerve, and the numbness will wear off.

• If the dressing gets loose, put a new one on top to keep the tube in place. We will give you a few dressings to take home with you.

What do I need to know about the numbing medicine?

• It is normal to be unable or barely able to move your toes or fingers while the pump is giving you numbing medicine.

• It is normal to have more feeling in some areas of your arm or leg than others while the numbing medicine is working.

• Not all areas are affected equally by the nerve block. You may still feel pain. Take your pain pills, as ordered, when you feel pain.
• You will be given a prescription for pain pills before you leave the hospital.
  › It is very important to have the prescription filled at the drugstore before you leave the hospital. You will need to have these pain pills available to take as soon as you start to feel pain.
  › When you take a pain pill, it can take up to an hour before it starts helping the pain.

What do I need to do at home?
• Protect your arm or leg. Because it is numb, you will not feel pain or temperature changes as you usually would. Make sure your fingers or toes are not touching anything hot or cold.
• Most of your arm or leg will be covered with a cast or dressing. Watch the parts that you can see to be sure they’re not touching anything unsafe.
• Twice a day, check the spot where the tube enters your skin.
  › If you had foot or ankle surgery, the tube will enter your skin near the back or side of your knee.
  › If you had shoulder or arm surgery, the tube will be taped near your neck or upper arm.
› Make sure the skin is not red, puffy, or painful. If you notice the skin is red, puffy, or painful, call Acute Pain Services at 902-222-1938 right away.

• Keep the clear dressing over the tube dry and in place.

› Sometimes a bit of numbing medicine leaks back from the tube. This may cause some wetness under the dressing. **If this happens, cover the dressing with gauze and tape, or put a new dressing on top.**

› **Do not try to remove the dressing.**

› If you are having pain and feel like the tube has come out, call the Acute Pain Service doctor at 902-222-1938.

• **Do not drive while your arm or leg is numb.**

• **Use crutches or a walker when walking, if needed.**
How do I remove the nerve block tube?
The tube should be removed when the pump is empty. Usually this is about 2 days after the home nerve block pump is connected. Remember that there are NO needles in your skin, only a small piece of flexible tubing.

To remove the nerve block tube:
1. Wash your hands well.
2. Pull off the dressing.
3. Pull off the strips of tape from your skin.
4. Gently pull out the tube and look for the silver metal tip at the end of the tube. The tube should come out easily and with little discomfort. If you have a lot of pain, or are not able to remove the tube, call the Acute Pain Service doctor at 902-222-1938.
5. If you see the silver metal tip, throw the tube and the pump in the garbage.
6. If you do not see the silver metal tip, or you feel that something has gone wrong while removing the tube, place the tube in a plastic bag and call the Acute Pain Service doctor at 902-222-1938. We may need to see the tube.
Call the Acute Pain Service doctor right away at 902-222-1938 if:

- You have tingling around your mouth or tongue, feel lightheaded, or have ringing in your ears. This may be a sign you are getting too much numbing medicine.
- You have pain that is not being controlled with the pump or your pain pills.
- The area around where the tube enters your skin is red, puffy, or painful.
- The tubing comes away from the pump or is pulled out of your skin.
- You are not able to remove the tubing.

What are your questions?
Please ask. We are here to help you.
A member of the Acute Pain Service will call you at home every day until you have removed your nerve block tube. They will ask you questions such as:

- How does your skin look where the tube goes in?
- Is the level of numbing medicine in the pump going down?
- Did you see the silver metal tip on the end of the tube when you pulled it out?
- Have you started taking your pain pills?
- How is your pain?

You will also be able to ask a member of the Acute Pain Service any questions you have.
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