

## How to care and what to expect from your Nerve Block Catheter and Medication Pump



### What is a Nerve Block Catheter?

In order to prevent and treat pain after your surgery, your anesthesiologist has inserted a small tube under your skin. This tube is known as a “peripheral nerve catheter”. This catheter allowed the anesthesiologist to inject local anesthetic (numbing medication) near nerves close to the area where you had your surgery. This will “freeze” or numb the area so you feel less pain. The catheter is then connected to a pump that will allow for a steady infusion of the local anesthetic.

At home, the amount of local anesthetic you receive is lower than what you received in the hospital. Therefore, it is normal to feel less “freezing” after 12 or 15 hours, and you may start feeling some pain. If this happens, **do not remove the catheter**. You can also take the pain medication prescribed by your surgeon.

### What is a Medication Pump?

A medication pump is a lightweight, non-electric device that does not need programming or batteries. It is made of hard plastic and looks like a baby bottle. The local anesthetic medication is contained in a balloon system inside a hard plastic bottle. The balloon system slowly delivers the numbing medication

down the tube to the nerves close to where you had the surgery. The pump will deliver a constant amount of the local anesthetic (usually 5ml/hour). You should have enough medication to last about 60 hours.

### How to Manage your Nerve Block Catheter and Pump

- Look at the medication pump to make sure that the balloon is getting smaller. This means that the medication pump is working. It may take 12 hours before you can notice a change in the size of the balloon.

When the balloon inside the bottle is completely emptied, it will look like a stick. This means that the infusion of the medication is complete.

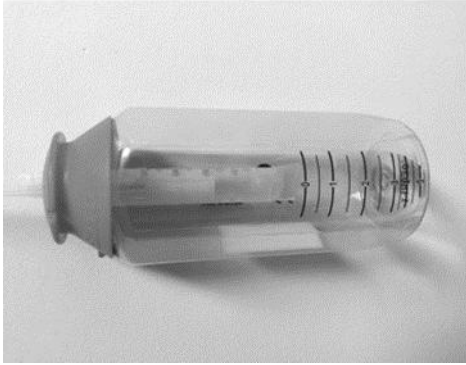
If the medication pump balloon is not getting smaller, contact the Acute Pain Service at 807-684-6000

Check the tubing throughout the day to make sure it is not kinked.

*Full pump*



### *Pump that has been infusing*



- Make sure the white connector is taped to your skin.
- Try to carry the pump as close as possible to the same level as where the white connector is taped to your skin.
- Keep the medication pump away from direct sunlight, high temperatures (for example hot shower), or low temperatures (for example outside in the winter).
- Try to keep the medication pump in room temperature settings.
- Showering: It is best not to shower when the medication pump is attached. If you shower, a waterproof dressing needs to be placed over the nerve block dressing. You can use clean plastic wrap or a plastic bag. Put the medication pump on a chair or stool outside of the tub or shower.
- Sleeping: When you are sleeping, try to place the medication pump next to the white connector on the tubing that is taped to your skin.
- Do not put the medication pump on the floor or hang it above your head.

- Do not put the medication pump near an electric blanket.

## **Care of Your Frozen Limb**

The affected part of the body where the nerves are blocked will feel numb. You will not have full control of the numb part. Support and protect your numb part to help prevent injury:

- Do not put extra pressure on the numb part.
- Do not drive a car while you have a numb arm, leg or foot.
- Do not handle anything hot or cold or carry anything if you have a numb arm.
- Use a sling if you have a nerve block in your arm. Make sure it is not too tight.
- If you have a nerve block in your leg, use a walker or crutches as instructed by your physiotherapist.

## **How to remove the Nerve Block Catheter**

**Removing the nerve block catheter should be painless.**

When the medication pump is empty, or as instructed by the Acute Pain Service, remove the nerve block catheter as follows:

1. Gather the following equipment:
  - a. A box of clean tissue
  - b. A band aid
  - c. A plastic bag for disposal.

2. Sit in a comfortable position.
3. Remove the tape and dressing from around the catheter insertion site.
4. Gently pull the catheter away from your skin. There is about 6 cm of plastic catheter to be pulled out. Never cut the catheter. Stop pulling and call the Acute Pain Service if there is a lot of resistance felt or if you feel a shock going into your numb extremity when removing the catheter.
5. You may have some bleeding from the insertion site after the catheter is removed. If this occurs, place some clean tissue over the site and apply direct pressure with your hand.
6. Put a bandage over the dry insertion site.
7. Place the catheter, tubing and pump into a plastic bag and dispose of as directed by the Acute Pain Team. You can expect the pain to increase 1 to 4 hours after removal of the catheter. This is normal. Use your pain medication as directed.

## What to do if...

**Leaking:** Pooling of a small amount of clear or pink liquid under the dressing is very common. No action is required. If the dressing is peeling off because there is too much leakage, call the Acute Pain Service.

**Bleeding:** A small amount of reddish discharge is normal. If bleeding is heavy and very red in colour, hold pressure over the site for at least 5

minutes. If it does not stop, call the Acute Pain Service.

**Blockage:** If the balloon in the bottle is not getting smaller after at least 24 hours and the pain is getting worse. This could mean that the catheter is blocked. Make sure the tubing is not kinked. Call the Acute Pain Service.

## Call immediately if...

1. You suddenly have tingling around your mouth or tongue, have ringing sounds in your ears or feel lightheaded. You may be experiencing local anesthetic toxicity.
2. You notice skin changes, such as pus, redness, puffiness or pain around the insertion site. You may be experiencing infection. This is very rare.
3. You feel abnormal intense pain, either at the surgical site or elsewhere in the surgical limb. This could be due to block failure, over the phone the Acute Pain Service will be able to give you information about what is going on and what to do.
4. Your limb is still weak or numb several hours after the end of the infusion and the block is not wearing off.

## Specific Side Effects

1. Adductor canal block (middle of your thigh):
  - a. Weakness in your thigh muscles. This is very rare. It may be difficult to bend at your hip or lift your leg when walking (you must make sure that before walking you have support with a walker or crutches).
2. Interscalene block (side of your neck):
  - a. Arm paralysis or weakness (you must protect your arm in a sling).
  - b. Hoarseness of your voice (blocking of the vocal cord nerves).
  - c. Feeling shortness of breath. Especially when you lie flat.
  - d. Droopy eyelid and small pupil on the side of your block (Horner's syndrome).
3. Infraclavicular block (just below your collar bone):
  - a. Arm paralysis or weakness (you must keep your arm protected in a sling).
4. Popliteal fossa block (back of thigh, just above the knee):
  - a. Foot paralysis or weakness(it is very important to use crutches or a walker to prevent falls).

## Who to Call for Help

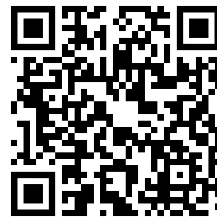
**Thunder Bay Regional Health Sciences Centre**

**807-684-6000 hospital switchboard and ask for the Acute Pain Service**

**A member from the Acute Pain Team will be calling you daily. They can answer your questions and concerns at this time. Make sure we have your correct phone number.**

**Pain after Surgery:**

<https://www.youtube.com/watch?v=Jbei qE2ozv8&feature=youtu.be>



**Peripheral Nerve Block Removal**

<https://www.youtube.com/watch?v=mm S3GZLy-PQ&feature=youtu.be>



To view the videos, using a smartphone or tablet with a camera, open the camera and point the camera at the code as if you were going to take a photo of it. A pop-up will open on your device asking you to open the video. The videos can also be found at:

[www.rjac.ca](http://www.rjac.ca)