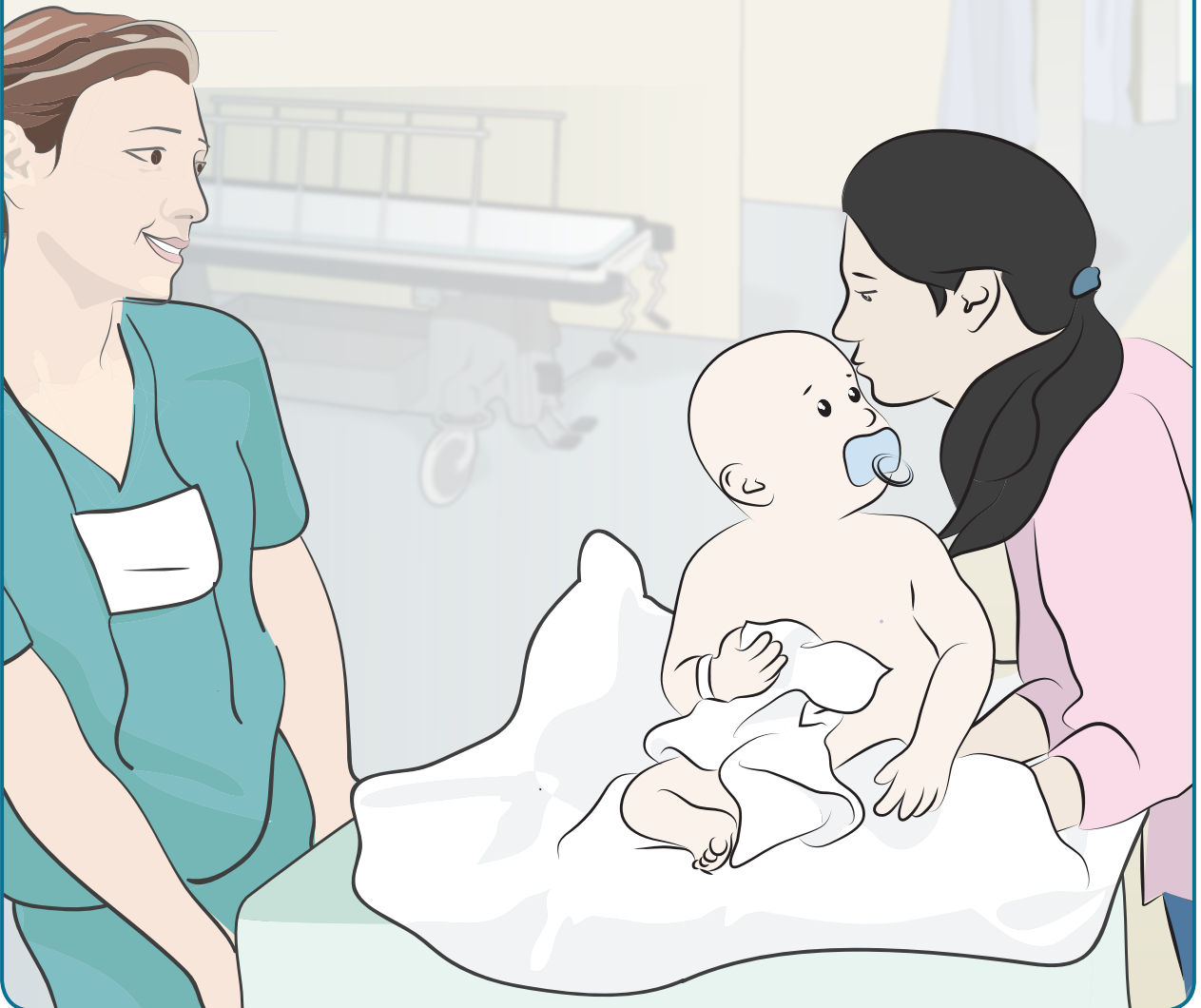




TAKING CARE OF YOUR CHILD'S PAIN AFTER SURGERY

A patient friendly book for:



This booklet was brought to you by the **Montreal Children's Hospital's Acute Pain Service team, Surgery and Intervention Centre and Post-Anesthesia Care Unit.**

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This material was adapted from:

Facts On Taking Care of Your Child's Pain at Home After an Operation, by Holly Vali, CNS and Manon Ranger, CNS. Montreal Children's Hospital, Acute Pain Service, 2002.



IMPORTANT: PLEASE READ

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute for medical care. Contact a qualified healthcare practitioner if you have any questions concerning the care of your child.

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This material is also available at:
MUHC Patient Education Portal
www.muhcpatienteducation.ca

Your child will probably have pain after surgery. The good news is that there are many things you can do to help your child recover quickly and comfortably at home. This booklet will help you better understand how to manage and care for your child's pain after surgery.

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A MESSAGE FROM US

Dear parents

Your child has just had surgery and is now going home. For the first few days, he/she will probably feel some pain.

We know that a child's surgery can be a stressful experience for the entire family. You might feel overwhelmed with questions, information, and feel a mix of emotions. The good news is that being prepared and knowing what to expect can help you better cope with stress.

Using our experience and what parents have told us, we have created this booklet to be useful, practical and easy-to-read. It was developed to help you better understand how to care for your child when he/she is having pain at home.

Use this booklet as a reference when you meet with the members of your health care team. Review it later with your family. Let it be your guide while your child is recovering at home.

As a parent or caregiver, you play an active part in preparing your child for surgery and supporting them through their recovery. Prepare yourself by learning and asking us many questions. Carefully follow all the instructions we have included for you here. They will help prevent any health problems after surgery and help your child recover quickly and comfortably.

Being prepared and feeling at ease with what is ahead is the best way to help your child. We hope that this booklet will support you as you do this. Know that you are not alone. We are here to help.

*Your Montreal Children's Hospital Pain Service,
post-anesthesia care and preoperative
assessment clinic teams.*

PAIN AFTER SURGERY

WHAT TO EXPECT

Your child will probably have pain after his/her surgery. The good news is that over time, as your child recovers, this pain should get better.

There is a number of medication and non-medication pain relief strategies that can help. Used correctly, medication and pain relief strategies will help your child hurt less. In this way, he/she will be able to recover quickly, return to a regular routine, and his/her daily activities.

HOW TO KNOW IF YOUR CHILD IS IN PAIN

It is not always easy to tell if a young child or infant is in pain, even if it is your own child. Usually, this becomes easier as the child grows older and learns how to better express him- or herself.

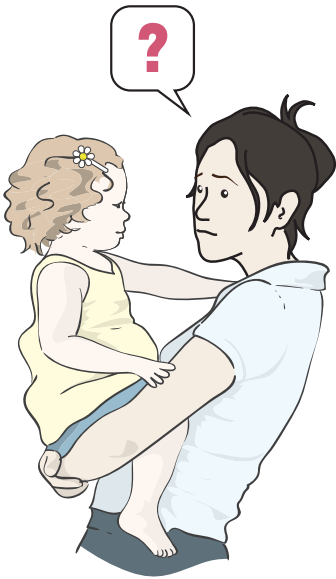
Here are some ways to help you know if your child is in pain:

Just ask.

Your children can give you a lot of useful information. Children as young as 2-3 years old can express about their pain. Use the same language you always speak with them.

- Simply ask him or her:
“Does it hurt?”
“Do you have bobo?”
“Do you have pain?”
- Is he/she moaning or crying more than usual?
- Is your child difficult to console?





Sometimes, children may think that they will have an injection, bad syrup, or another surgery if they tell you that they are in pain. Reassure and comfort your child. Explain what you will do if he/she does have pain.

You can also ask your child to show where it hurts. Many children can also answer these questions:

“When does it hurt more?”

“When does it hurt less?”

“What makes it better?”

Your child may say it hurts.

He/she may use words like “pain”, “hurt”, “booboo”, “sore”, or “ow”, and may even point to the part that hurts, protect it or rub it.

Your child may act differently.

For babies and children that cannot tell you that they are hurting, you may be able to tell that they are in pain by looking at how they are acting. The following questions will help you recognize typical signs of pain in children:

- is your child moving differently or not able to move as well?
- is your child frowning?
- is he/she kicking out his/her legs?
- is he/she grinding his/her teeth?
- is your child pulling their legs up to their stomach?
- is he/she more tense or stiff?
- does he/she seem restless?
- is his/her body arched?
- is he/she just not himself or herself?



DID YOU KNOW?

Every child feels or talks about pain differently. That is, children do not express their pain in the same way. For this reason, it is important to:

- Know how to tell your child is in pain
- Treat pain properly
- Treat pain right away
- The following pages in this booklet will help you learn how.

PAIN SCALES: HOW TO KNOW HOW MUCH IT HURTS

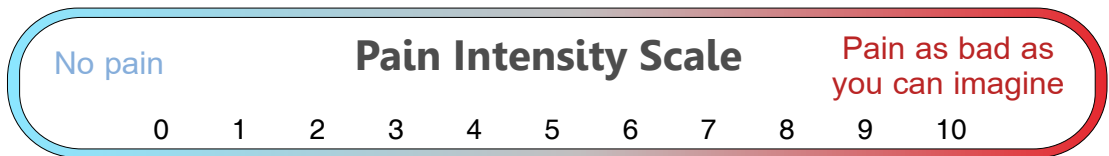
FACES PAIN SCALE

If your child is 4 years or older, the nurse may have used a faces pain scale to help him or her tell how much it hurts. You can continue to use this same scale at home. To have more instruction about how to use this scale please go to : www.iasp-pain.org/FPSR



0 TO 10 PAIN SCALE (numeric pain rating scale)

If your child is between 8-12 years of age and older, the nurses in the hospital may have used the 0 to 10 pain scale. You can do the same. Ask your child how much it hurts on a scale from 0 to 10, where 0 means no pain and 10 means the worst pain ever.



On this scale, mild pain is usually 1-3, medium pain is usually 4-6, and strong pain is usually 7 or more.

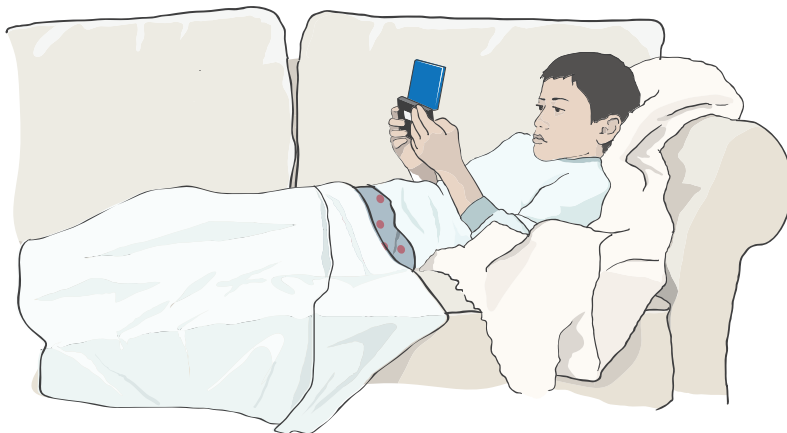
BEHAVIOR PAIN SCALE

If your child is younger than 4 or developmentally delayed, the nurse will use a scale that looks at pain behaviors (that is, how children act when they are in pain) to rate pain on a scale from 0-10. She will show you how to use it if applicable for your child. To have more instruction about this pain scale, please go to: wps.prenhall.com/wps/media/objects/3103/3178396/tools/flacc.pdf

TAKING CONTROL OF PAIN

Do not wait until your child is in a lot of pain before you give medication. It may take longer for the pain to go away. Along with pain medication, try to comfort and distract your child.

Encourage calm play activities or a quiet, soothing environment that will help him or her recover. This will also help take your child's mind off the pain.



PAIN MEDICATION

Before you leave the hospital, the doctor or nurse will tell you what medication to give to your child. For some children, we may recommend that you give medication regularly for a little while. For others, we may recommend to give pain medication only if your child starts having pain.

Whatever your child's pain control plan is, it is very important to follow the prescription and instructions very closely.

There are many types of pain medication that can be used after surgery. Some of these medications are used alone. Others are used together with another medication.

Your pain control plan may include the following types of medications:

- Acetaminophen (e.g. Tylenol® or Tempra®)
- Ibuprofen (e.g. Advil® or Motrin®) or another “non-steroidal anti-inflammatory medication.”
- A stronger pain medication (“opioid”). Examples of these are: morphine, hydromorphone (or dilaudid), and oxycodone.



WHAT TO GIVE?

Many over-the-counter medications that you find in your pharmacy may also contain acetaminophen or ibuprofen. To be safe, always discuss your medications with your pharmacist. He/she can answer your questions and make sure that you have what you need.

FOR MILD PAIN:

Give your child acetaminophen (also available in suppository). This type of medication is also called Tylenol® or Tempra®.

FOR MEDIUM PAIN:

Give your child acetaminophen with ibuprofen (e.g. Advil® or Motrin®) only if your doctor has recommended that you do so.

FOR MEDIUM TO STRONG PAIN:

Continue with acetaminophen (e.g. Tylenol® or Tempra®) **AND** with ibuprofen (e.g. Advil® or Motrin®) as recommended (as above).

Give your child the stronger medication (opioid) (e.g. morphine, dilaudid, oxycodone), exactly as you were instructed (that is, as it was prescribed).



SUGGESTION:

Whenever you are giving your child medication, make a note of what time you gave it. It's easy to lose track, especially if your child is taking more than one type of medication at a time. Re-check your child's pain after giving pain medication to check if the pain is less than it was before.

USING OPIOID MEDICATION SAFELY

Opioid medications (e.g. morphine) are safe to give to children, for medium to strong pain, when used with the guidance of your doctor, nurse and pharmacist.

Opioids may, however, have some side effects (or unwanted reactions). The most common side effects are drowsiness (also called somnolence), constipation and nausea.

DROWSINESS (or somnolence)

A little drowsiness when taking opioid medication is very normal. However, if you notice that your child is getting drowsier over time, or sleeps most of the time, stop giving it and contact your doctor, nurse or pharmacist. Your child's medication dose needs to be adjusted.

Do not give your child any other medications that can cause drowsiness when taking opioids (unless your doctor has said you can). Examples of medication that cause drowsiness are:

- muscle relaxants
- nausea medications, such as Gravol (or dimenhydrinate)
- allergy medications, such as Benadryl (or diphenhydramine)



Teenagers should not drink alcohol or drive while taking opioids.



In very rare cases, a child may have severe drowsiness. **Call 911 for immediate medical support if:**

- your child is sleeping deeply and
- you are having trouble waking him or her up or keeping him/her awake

NAUSEA

If nausea (upset stomach) and vomiting persist and/or your child stops eating and/or drinking, contact the doctor or nurse as indicated.



CONSTIPATION

After a few days of taking an opioid medication, your child may find it hard to have a bowel movement. Help prevent constipation by doing this:

- Drink lots of liquids (e.g. water, juice)
- Eat foods that are high in fiber (e.g. beans, lentils, whole grains cereals, fruits and vegetables).
- Keep moving. Encourage your child to be as active as allowed by your doctor.
- In some cases, we may recommend a stool softener or laxative.

WILL MY CHILD BECOME ADDICTED TO HIS/HER PAIN MEDICATION?

Parents are sometimes worried that a child who takes opioid medication will become addicted or learn to rely on drugs. Research shows that if opioid medication is taken after surgery, as prescribed by a doctor, it is safe to use and your child will not become addicted.

NON-MEDICATION PAIN RELIEF STRATEGIES

Helping to take your child's mind off the pain or surgery can help comfort and relax your child. This is as important as giving pain medication to your child. There are many information resources on this topic that you may find useful. See the "Looking for more information?" section of this booklet on [page 14](#) to learn more.



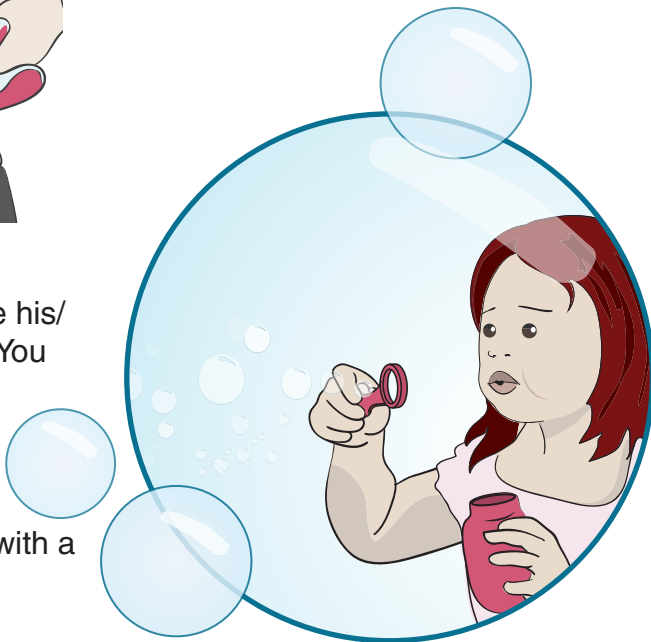
COMFORT YOUR CHILD

Offer your child comfort in the ways that worked best before the surgery. Hold, cuddle, rock or stroke your child. Give an older child a back rub, or encourage him or her to listen to music or practice breathing.

DISTRACT YOUR CHILD

Distraction will help your child take his/her attention away from the pain. You can:

- Watch TV or videos
- Read or tell stories
- Blow bubbles
- Playing a favorite game or with a favorite toy
- Relaxation (for teenagers)



YOUR CHILD'S PAIN CONTROL PLAN

Please fill in the information below. You can also ask your nurse to help you fill this in before you leave the hospital.

Name of pain medication:

When should I give this?

How much do I give?

How often do I give this?

Name of pain medication:

When should I give this?

How much do I give?

How often do I give this?

Name of pain medication:

When should I give this?

How much do I give?

How often do I give this?



SPEAK TO YOUR DOCTOR, NURSE, OR PHARMACIST, IF:

- Your child's pain is getting worse.
- Your child's pain is not relieved.
- You have any questions or concerns.

LOOKING FOR MORE INFORMATION?

MCH Family Resource Library and librarian is also available to help you with information.

Go online: www.mchfamilylibrary.ca

Call: (514) 412-4400 ext. 22383

Visit us in-person:

**Family Resource Centre and Library
Block A, room A RC.1107
Montreal Children's Hospital
1001 Decarie Boulevard
Montreal (Quebec) H4A 3J1**

OTHER RELATED WEBSITE LINKS:

MUHC Patient Education website:

www.muhcpatienteducation.ca

- Click on "Children's Health"
- Click on "Surgery for Children"
- Choose any material of interest

Day or Ambulatory surgery:

www.thechildren.com/patients-families/hospital-visits/day-or-ambulatory-surgery



DID YOU KNOW?

You can borrow books from the MCH Family Resources Library. Feel free to browse the list and search for any topic(s) which might be related or relevant to your child's surgery.

NOTES

Use these pages to keep track of your child's pain (e.g. amount of medication given, other strategies that helped). Write down questions or concerns to discuss with your doctor or nurse. Keep it for general note-taking.

A series of horizontal dotted lines for note-taking, spanning the width of the page. There are 20 lines in total, providing a structured space for recording information.




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- A + B** Montreal Children's Hospital
- C + D** Royal Victoria Hospital
- D** Montreal Chest Institute
- D** Cedars Cancer Centre
- E** MUHC Research Institute
- S** Shriners Hospitals for Children
- ▲** Main Entrances
- Ⓟ** Underground Parking