

Peripheral Nerve Catheter Instructions

Your surgeon has requested that you receive a continuous peripheral nerve catheter for an anesthetic nerve block to enhance your pain control following your surgical procedure. This is basically a tiny tube, which is inserted through the skin to deliver anesthetic (numbing) medicine to the area near the nerves supplying sensation to the surgical area. This tubing is similar to an intravenous (IV) catheter and is inserted before your operation, but after you receive sedative medication.

As with any medical procedure, there are risks associated with continuous peripheral nerve catheters. Specifically, the risks include but are not limited to, bleeding, infection or damage to the nerve or surrounding blood vessels. Many steps are taken to keep these risks as small as possible and the occurrence rate of any of these risks is less than 1%. These risks are outlined in the consent form that was signed during the admission process prior to your procedure.

1. Nerve blocks are designed to minimize pain after surgery, not eliminate it completely. Those patients who have had similar surgeries with and without nerve blocks, report a >90% reduction in pain. Most patients will become quite comfortable when oral pain medications are added to their nerve block infusions. Because there will likely be some residual pain after the procedure, some patients will mentally magnify the small fraction of pain they experience because they have no reference to “unblocked” surgical pain. Regrettably, some patients have removed their catheters thinking they weren’t working, only to completely unmask their actual pain. Please consider this when you sense some discomfort.
2. The pump contains no narcotic.
3. A completely numb and paralyzed limb for 8-24 hours after surgery is normal; do not be alarmed; the nerve block will wear off gradually. You will experience some tingling and the return of sensation and strength as your limb recovers. The pump is filled with anesthetic (numbing) medication that is weaker than the one used during surgery, so you should expect less numbness a few hours after you leave the hospital.
4. Do not drive or operate heavy machinery while your nerve block is in effect. You will not have complete control of the affected limb.
5. Be aware of your surroundings. While the block is in effect, your normal protective mechanisms are not intact. Do not allow your anesthetized limb to contact anything that may harm it. Rest your limb on a pillow, and move it slightly every hour or two.
6. Take your oral pain medicines when you begin to feel some discomfort. Do not wait until the pain is intolerable, as the oral medicines will take some time to be absorbed and will not provide immediate pain relief. It is not advisable to take pain medicines while you are completely pain-free, as you risk causing nausea and other undesired side effects.
7. The first signs of over-medication of the local anesthetic in your nerve block are confusion, incoherent speech, ringing in the ears and tingling around the lips. Other concerns may include rash or hives, fever greater than 101.5°F or excessive pain or redness at the catheter insertion site. If you experience any of these symptoms, please call the phone numbers below immediately.
8. Areas of numbness or tingling and some muscle weakness in the affected limb are normal while the nerve catheter is in place. You should call the phone numbers listed below if any numbness or weakness persists for more than 12 hours after the catheter is removed.
9. Report any swelling or severe bruising at your nerve block site to the phone numbers listed below.
10. You may perform your physical therapy exercises as directed by your surgeon.
11. Do not submerge the pump in water. Do not expose the pump to extremes of temperature.
12. You may bathe via a sponge bath. Showering will likely dislodge the catheter.
13. Care must be taken not to dislodge the catheter(s) from the skin or the tubing from the elastic pump. This is to preserve the flow of the anesthetic medication and the sterility (total cleanliness) of this pain management system.
14. The catheter(s) are held in place by the dressing and tape on your skin; they are quite resilient, however, excessive movement, pulling or friction can dislodge them. Once dislodged, they are not replaced because the nerve is not safely identifiable for some time after the catheter is

- removed. If the dressing appears to be pulling free, you may re-secure it with household tape. Avoid changing the dressing yourself. It is likely that you will pull the catheter out inadvertently.
15. You may not be able to see a change in the size or shape of the pump in the first several hours. When the pump is empty, you will feel the hard center core of the pump and the infusion will be complete (usually after 1 or 2 days). When the infusion is finished, remove the catheter following the instructions below.
 16. A small amount of dark fluid around the nerve block catheter is normal. You may also see some clear fluid leaking around the catheter site and dressing. This is normal and extra gauze may be applied to the original dressing. If you see the pump or tubing leaking, please call the primary phone number listed below - this situation can be corrected.
 17. If you feel that your surgical site is too numb, you may turn off your pain pump temporarily by moving the dial to 0 or closing the clamp attached to the tubing. Turn the pump back on to the previous setting before it becomes painful.
 18. If you are not getting enough pain relief, please call the primary number listed below.
 19. The pump contains no narcotic so it is safe to take your oral pain medication as prescribed. Do not take your pain pills if you are not having pain.
 20. Occasionally, you may see air bubbles in the tubing. They are harmless.

To remove the peripheral nerve catheter:

1. Wash your hands
2. Stop the infusion by closing the clamp attached to the tubing
3. Remove the adhesive and gauze over the tubing
4. Slowly remove the catheter by pulling it from the skin (it should come out easily with gentle pressure)
5. Apply pressure to the site for five minutes
6. Apply an adhesive bandage
7. Inspect the site for bleeding, redness or swelling – if any of these symptoms occur, please notify the phone numbers listed below.

If you have a question or concern about the function of the pump, please contact the primary phone number below. If the nurse is unable to resolve your issue, please contact the Department of Anesthesiology at Providence hospital.

Contact Information:

Primary – 24 hour nursing support: 800-444-2728

Secondary – Providence hospital: 254-751-4000

Ask for the Department of Anesthesiology on-call Pain doctor