

Peripheral Nerve Catheter Discharge Instructions (UH-CVC)

What is a peripheral nerve catheter?

A peripheral nerve catheter is one way to relieve pain at the site of surgery. The anesthesiologist will place a small hollow plastic tube (catheter) under the skin next to the nerves that provide feeling to the area where surgery will be performed. This will be done before you go into the operating room. An anesthesiologist is a medical doctor who specializes in giving drugs to control pain before, during, and after surgery.

How much pain relief should I expect?

The goal is for the peripheral nerve catheter to reduce the intensity of your surgical pain. Some patients' pain control is better than expected, and others are worse. The team will make every effort to maximize your pain control after surgery, including using other types of pain medication as needed.

What medicine will I be getting through the catheter?

The catheter will be used to continuously transfer local anesthetic (numbing medicine). The medicine will cause some numbness in the area of surgery and reduce your pain. The bulb pump contains no narcotic. Your surgeon may also prescribe pain medicines to take by mouth after your surgery.

How does the infusion work?

The catheter is connected to a bulb pump with a local anesthetic inside of it. Pressure from the bulb pump delivers the medication at a steady rate. The bulb pump device infuses the local anesthetic through the catheter continuously at a pre-determined rate.

How long will it last?

The local anesthetic used during surgery will last around 12-18 hours. A completely numb and paralyzed arm or leg during this time is normal. When the local anesthetic used during surgery wears off, the medicine going through the catheter will not be as strong. You will feel some return of sensation at this time. Additionally, you will have medicine that your surgeon has prescribed that you can take by mouth to help relieve your pain.

How do I protect my numb body part?

Some amount of numb feeling will last for a few hours after the catheter infusion has been stopped. Protect an arm or leg that is numb by keeping it close to your body (using a sling or brace) and avoiding very hot and very cold objects (heating pads, ice packs) as they can damage your skin without you being aware of it. You may perform your physical therapy exercises as directed by your surgeon.

How do I care for my catheter and bulb pump device at home?

- Keep the dressing over the catheter clean and dry. Do not take a bath or shower while the catheter is in place. You may bathe by sponge bath.
- Do not submerge the bulb pump in water.
- Do not expose the bulb pump to very hot or very cold temperatures.
- Some leaking of local anesthetic under the clear dressing is normal. You may
 add another clear dressing or tape to the area to help keep it in place. Do
 not remove or change the dressing yourself as you may accidentally pull out
 the catheter.
- If you see the bulb pump or the tubing leaking, please call the primary number listed below.
- Check all connections to your bulb pump each morning and each evening.
 Keep them tight and keep the tubing free of any kinks.

How does the catheter come out?

The infusion should continue for about 3 days from when the bulb pump is

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connected. Sit down to remove your catheter. You may want to have a family member or friend assist with the catheter removal.

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. Gently remove the catheter by pulling it from the skin (it should come out easily with gentle pressure).
- 5. Apply pressure to the site for 5 minutes.
- 6. Apply an adhesive bandage to the site.
- 7. Inspect the site for bleeding, redness, or swelling. If any of these symptoms occur, please notify the phone number listed below.
- 8. After removal, you can dispose of the bulb pump and catheter.

In the unlikely event that you would need an MRI while the catheter is in place, you should contact the Acute Pain Service/Anesthesia number below. You may be required to remove your catheter prior to your MRI.

When do I call for help?

Call **Acute Pain Service/Anesthesia immediately** and turn your bulb pump off if you have the following signs and symptoms:

- Numb or tingling lips or mouth
- Ringing in the ears
- A metal taste in your mouth
- Difficulty breathing or dizziness
- Confusion or incoherent speech
- Fever greater than 101.5 degrees Fahrenheit
- Pain redness, swelling, or severe bruising at the catheter insertion site
- Rash or hives

Call the **Acute Pain Service/Anesthesia Department** for the following **non-**

immediate concerns or any questions you may have regarding your peripheral nerve catheter:

- Numbness or weakness lasts more than 12 hours after the catheter is removed
- You are not getting enough pain relief
- You feel that your surgical site is too numb.

What is the contact information?

Acute Pain Service/Anesthesia: Dial 1 (734) 936-4000. Ask to speak to the
Acute Pain Fellow, or Acute Pain Nurse, at pager number 9031. If they are
not available immediately, leave your contact information and the nurse or
doctor will call you back.

While your catheter is in place, a doctor or nurse will contact you each day by telephone to make sure your catheter is working safely.

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