

Pain Huddle Points

- The failure to treat postoperative pain adequately is at least in part due to the reliance on monotherapy with opioid analgesics
- Multimodal analgesia is defined as the simultaneous use of different classes or modes of analgesics that modulate different pathways and receptors to provide superior pain control.
- Among IV agents used in multimodal analgesia are the opioids, NSAIDs, acetaminophen, clonidine, and ketamine
- NSAIDs modulate pain pathways in multiple ways, reduce local inflammation, and may prevent peripheral and central sensitization.
- IV Ketorolac (Toradol):
 - Short term management (no more than 5 days) of moderately severe acute pain
 - <65 y/o: 30 mg every 6 h (120 mg/day max; ≤105 mg/day recommended)
 - >65 y/o: 15 mg every 6 h (60 mg /day max)
 - Correct hypovolemia before administration
 - IV bolus inject over at least 15 seconds
 - Contraindications: history of peptic ulcer disease, GI bleeding, high risk of bleeding, advanced renal disease

Sinatra & Jahr, 2011, Cepeda et al, 2005