



Continuous Peripheral Nerve Block Catheter (CPNB)

The leaflet aims to answer your questions about the continuous peripheral nerve block catheter that we use to relieve your pain after surgery or trauma.

If you have any questions or concerns, please speak to a doctor or nurse caring for you.

What is a continuous peripheral nerve block catheter (CPNB)?

A nerve block catheter is a thin tube placed near your nerves in order to continuously bathe your nerves with local anaesthetic (numbing) medication. The catheter is attached to a pump filled with local anaesthetic (numbing) medication and it is continuously delivered through the catheter to relieve pain as long as necessary (usually for two to five days). When it is no longer required, the catheter will be removed.

Following insertion of the CPNB catheter

Your body temperature, pulse, blood pressure, breathing rate and pain will be assessed regularly throughout the day by the nursing staff on your ward. They will check how you are feeling and assess the nerve block catheter entry site for leakage and signs of infection. You will be reviewed by the inpatient pain team on a regular basis.

Potential benefits and complications of a CPNB

The benefits include:

- Reduction of pain
- Reduction of the need for strong painkillers such as Morphine, therefore reducing

Side effects/complications include:

- Local anaesthetic toxicity (LAT)
- Nerve damage

- side effects such as nausea, vomiting, drowsiness and constipation
- Faster mobilisation

- Infection
- Blood clot

Local Anaesthetic Toxicity effects (LAT)

- Feeling Light headed and/or dizzy
- Blurred vision
- Tingling in the lips and/or tongue
- Nausea and/or vomiting
- Feeling Drowsy
- Feeling Unwell

LAT IS RARE AND UNLIKELY BUT PLEASE DO INFORM NURSING STAFF IF YOU FEEL ANY OF THE SYMPTOMS MENTIONED ABOVE.

Care during the time you have a CPNB

You will feel less pain but also part of your body may be numb with reduced sensations. It is important to protect the limb by immobilisation, such as a sling for an arm and proper positioning. If your leg has been numbed, you are advised to seek assistance with mobilisation. While you are awake, change the position of your arm or leg often. This helps to avoid putting too much pressure on the limb for a long period of time.

The Inpatient Pain Service

This hospital has a team of doctors and nurses who specialise in the management of pain relief. They are available to give advice on your pain control after an operation. Please contact the **Inpatient Pain Service** or telephone **020 8725 1255**, and ask for bleep number **6477** or **6159** (Monday to Friday 8am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all of our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

