YOU are the most important member of your healthcare team. Ask questions and get the FACTS before taking opioids to manage your pain.

OPIOID?

An opioid is a strong prescription pain medication. Possible side effects include nausea, vomiting, sleepiness, dizziness and/or constipation.

Common opioids include:

Generic Name	Brand Name
Codeine	Tylenol® #3* or #4*
Fentanyl	Duragesic [®]
Hydrocodone	Vicodin®*, Norco®*
Hydromorphone	Dilaudid [®]
Methadone	Methadose [®]
Morphine	MS Contin®, Kadian
Oxycodone	Percocet®*, OxyContin®
Oxymorphone	Opana [®]
Tramadol	Ultram®, Ultracet®*

^{*} Contains acetaminophen (Tylenol). Use caution if you're also taking acetaminophen separately.

SAFE STORAGE AND DISPOSAL

Store opioids out of sight and reach of children, teens, and pets

- Store opioids in private areas and lock up your pills if possible.
- Do not store your opioids in common rooms in the house (like bathrooms, kitchens) or in purses.
- · Keep a count of how many pills you have left.

Dispose of all unused opioids

- Use a permanent medication drop box.
 To find one near you, visit:
 https://apps.deadiversion.usdoj.gov/pubdispsearch/.
- Drop off at a community Medication Take Back event.
- Use your household trash as a last resort.
 - Mix opioids (do not crush) with used coffee grounds or kitty litter in a plastic bag and throw away.
 - Scratch out personal information on the prescription label and dispose of the original container.

Do NOT flush opioids down the toilet.

LEARN THE FACTS:

opioids & pain management







Michigan-OPEN.org

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UNDERSTANDING PAIN AFTER SURGERY

The GOAL OF PAIN MANAGEMENT is to manage your pain enough to allow you to do the things you need to do in order to heal: walk, eat, breathe deeply and sleep.

Pain Expectations

- Feeling pain after surgery is normal.
- Pain is usually worst for the first 2-3 days after surgery.
- Your pain may be well controlled with a schedule of over-the-counter medications.
- Pain medication is only one part of your pain management plan.
- Other things you can do to help manage pain:
 - mindful breathing
 - .
 - ▶ music
 - physical therapyrelaxation
- ► meditation
- ► daily reflection
- ▶ short walks



USING OPIOIDS **SAFELY**

BEFORE SURGERY:

- Ask your surgeon if you can use over-thecounter acetaminophen (Tylenol) or ibuprofen (Motrin or Advil) for your pain, before using an opioid.
- Tell your surgeon if you are currently taking any sedatives or benzodiazepines (like Valium or Xanax).

AFTER SURGERY:

- If you are still in a lot of pain after taking an over-the-counter pain medicine, use the opioid medicine your surgeon gave you.
- Do NOT mix opioids with alcohol, benzodiazepines (like Valium or Xanax), muscle relaxers, or other medications that can cause sleepiness.
- As your pain gets better, wait longer between taking opioids.
- Only use the opioids for your surgical pain. Do not use your opioids for other reasons.
- Talk to your surgeon if you are having trouble managing your pain.

If your pain is manageable, do not use your opioids.

Tell your doctor if you are pregnant or planning to become pregnant. Using opioid medications can cause harm to a fetus, including neonatal abstinence syndrome.

KNOW THE **RISKS**

You are at higher risk of developing a **DEPENDENCE OR ADDICTION** to opioids if you:

HAVE A HISTORY OF:

- Abusing alcohol, prescription, or recreational drugs
- Using tobacco
- Depression, anxiety, or other mood disorders
- Long-term (chronic) pain

TAKE OPIOIDS FOR LONGER THAN A FEW DAYS

TAKE OPIOIDS MORE OFTEN THAN YOUR SURGEON PRESCRIBED

You are at risk of an OVERDOSE if you:

HAVE A HISTORY OF:

- Sleep apnea
- Other breathing problems

MIX OPIOIDS WITH:

- Alcohol
- Benzodiazepines (like Valium® or Xanax®)
- Muscle relaxers
- Any medications that can cause drowsiness
- Recreational drugs

TAKE OPIOIDS MORE OFTEN THAN YOUR SURGEON PRESCRIBED

DO NOT SHARE YOUR OPIOIDS with others. Diversion (sharing or selling) of opioids is a felony.