

# Treating Postsurgical Acute Pain: Information for Providers

Opioids are often prescribed to manage severe, acute postoperative pain, but recent studies show that patients often receive more prescriptions than necessary. Overprescribing may result in an increased risk of long-term opioid use, misuse, and overdose. It could also lead to the excess prescribed opioids being used by someone other than the intended patient.

CDC reviewed external research and existing published guidelines to provide a reference for the management of acute postsurgical pain. Evidence-based clinical practice guidelines can aid providers and patients in making collaborative, safe, and effective decisions for treating pain.



## Making Decisions Regarding Pain Management

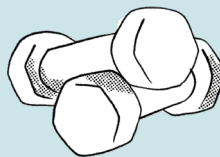
Decisions regarding pain management should be made collaboratively by you and your patient.

- Use nonopioid treatment options such as non-steroidal anti-inflammatory drugs (NSAIDs) or acetaminophen for acute postoperative pain.
- Only prescribe opioids if the pain is severe and the benefits outweigh the risks to the patient.
- Encourage patients to use non-pharmacologic therapies to help manage their pain.

### NON-PHARMACOLOGIC THERAPIES



Ice



Physical Therapy



Elevation

## Reducing Risk and Harm

When opioids are used for acute pain, prescribe the lowest effective dose of immediate-release opioids, and prescribe no greater quantity than needed for the expected duration of pain severe enough to require opioids.

- Mitigate potential opioid-related harms by evaluating risk factors such as history of misuse or overdose before prescribing opioids.
- Check with your state or local jurisdiction's Prescription Drug Monitoring Program (PDMP) to see if the patient is already receiving opioids or other medications that could put them at risk for overdose.



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