|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Recommended Post-Procedural Acute Pain Management Treatment Plan** | | | | | | | | |
| **Pain Level** | **Number of Tablets Per Discharge Prescription** | | | | | |  | |
| **Oxycodone 5mg IR** | **Hydrocodone/APAP 5/325mg** | **Tizanidine 2mg** | **Acetaminophen 500mg** | **Ibuprofen 600mg** | **Maximum MME Recommended** | |
| **Level 1:**  **Mild** | ALTERNATIVE  One-half to one tablet by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 14 | **PREFERRED**  1 tablet by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 20 | OPTIONAL  1 tablet by mouth twice daily for pain/ muscle relaxer.  Total Quantity: 28 | **SCHEDULED**  1 tablet by mouth every 6 hours for pain x 14 days. Alternate with Ibuprofen  Total Quantity: 42 | **SCHEDULED**  1 tablet by mouth every 6 hours for pain x 14 days. Alternate with Acetaminophen.  Total Quantity: 42 | **105 MME** | |
| **Level 2:**  **Moderate** | **PREFERRED**  One-half to one tablet by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 26 | ALTERNATIVE  1 tablet by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 40 | OPTIONAL  1 tablet by mouth twice daily for pain/ muscle relaxer.  Total Quantity: 28 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Ibuprofen  Total Quantity: 42 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Acetaminophen.  Total Quantity: 42 | **200 MME** | |
| **Level 3:**  **Moderate** | **PREFERRED**  1 to 2 tablets by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain    Total Quantity Recommended: 28 | ALTERNATIVE  1-2 tablets by mouth twice daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 42 | **SCHEDULED**  1 tablet by mouth twice daily for pain/ muscle relaxer.  Total Quantity: 28 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Ibuprofen  Total Quantity: 42 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Acetaminophen.  Total Quantity: 42 | **210 MME** | |
| **Level 4:**  **Severe** | **PREFERRED**  1 to 2 tablets by mouth three times daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 42 | ALTERNATIVE  1 to 2 tablets by mouth three times daily x 7 days; then 1 tablet by mouth once daily x 7 days if needed for pain  Total Quantity Recommended: 50 | **SCHEDULED**  1 tablet by mouth twice daily for pain/ muscle relaxer.  Total Quantity: 28 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Ibuprofen  Total Quantity: 42 | **SCHEDULED**  1 tablet by mouth every 3 hours for pain x 14 days. Alternate with Acetaminophen.  Total Quantity: 42 | **315 MME** | |
| **Pain Level Examples:**   * Level 1- Mild Pain: Acute fracture, radiculopathy, carpal tunnel * Level 2- Moderate Pain: Knee scope, ACL or thumb reconstruction, MTP fusion * Level 3- Moderate Pain: Ankle or wrist open reduction and internal fixation, shoulder scope, minor spine surgery * Level 4- Severe Pain: Total hip, knee, or shoulder arthroplasty, major spine surgery | | | | | | | | |

**Notes:**

***\**** *MME= Morphine Milligram Equivalency*

***\*\**** *Maximum number of tablets per discharge prescription is shown above in order to stay within the maximum recommended MME per category.*

***\*\*\*Reference: Mayo Clinic Departments of Surgery and Orthopedic Surgery Adult Opioid Prescription Guidelines 2019***