

## Patient Controlled Analgesia (PCA)

Royal Hospital for Women

March 2017

### What is a PCA?

PCA stands for **Patient-Controlled Analgesia**. It means that you can have control over your own pain relief using pain medicines such as morphine or fentanyl. When you start to feel uncomfortable, you press a button attached to an automatic pump. The pump will inject a small dose of the medicine into an intravenous (IV) cannula in your vein.

Your doctor (often your anaesthetist) will order the amount of pain medicine delivered by the PCA pump each time you press the button. By programming the right amount for you, the risk of severe side effects is very low.

You should press the PCA button when the pain starts to become uncomfortable. You should not wait for the pain to become very severe.

**You, the patient, is the ONLY person who should press the PCA button. This is for safety reasons.**

### Advantages:

- A PCA will allow you to rest comfortably.
- You may not need as much medicine from a PCA as when you receive injections for pain.
- A PCA may better control your pain and keep you alert and awake.
- You may be able to start moving around sooner. This may help prevent blood clots from forming, and help you get better faster.

### Rare complications:

- The pain medicine given in the PCA may cause nausea, itchy skin, or trouble urinating.
- Increased risk of infection from the intravenous drip.
- Under dosing or over dosing of the pain medication.

Whilst you are receiving the PCA you will be closely monitored by a registered nurse/midwife to ensure that you are receiving adequate pain relief and are observed for any complications.

### Let your nurse know if:

- You feel too sleepy.
- You feel sick or have vomited.
- Your pain is not at a manageable level.
- Your skin, where the IV is placed is painful, warm, red, swollen or bleeding.
- You see blood in the tube going to the pump.
- Your pump has no more medicine in it.
- Your pump alarm goes off.

Endorsed 16/03/2017. Reviewed by consumers in development stage February 2017. Should you wish to discuss any aspect of this information please send an email [RHWfeedback@sesiahs.health.nsw.gov.au](mailto:RHWfeedback@sesiahs.health.nsw.gov.au)