

Discussion Guide

Questions to ask before a C-section delivery

While not always top of mind, pain management is an important factor for expectant mothers to consider as they put their birth plan goals in place before childbirth. Whether it is a planned or unplanned C-section, women should feel empowered to have a proactive discussion with their health care provider about the range of pain control options available, including opioid alternatives such as EXPAREL[®] (bupivacaine liposome injectable suspension) that can effectively manage pain while potentially reducing or eliminating the need for opioids during the postsurgical recovery period.* This discussion guide will help you have an honest conversation with your health care provider prior to delivery to discuss what pain management options might be right for you.

Space is provided so you can write down notes during your next appointment.

How much discomfort is usually associated with this procedure?

Where your surgery is, how it's done, and how your body responds to pain medications can all affect how you feel. Ask your doctor what you can expect.

How long will I have to stay in the hospital or surgery center?

Ask about the usual stay for someone having a C-section or other surgery so you know how to plan. You can also ask what you will need to do (ie, walk, bowel movement, eat, etc) in order to be discharged from the hospital or surgery center.

Will my pain management options affect my newborn child, including breastfeeding?

Speak to your doctor about your options and if they will affect your newborn following delivery.

How can I avoid the need for opioids? What non-opioid options do I have?

There are a variety of medications your doctor may use before, during, and after surgery to minimize your need for opioids, including those that can be used to numb the area where you had your procedure.

TYPES OF NON-OPIOIDS		
SYSTEMIC	Aspirin Ibuprofen (eg, Advil [®] , Motrin [®]) Naproxen (eg, Aleve [®] , Naprosyn [®]) Acetaminophen (eg, Tylenol [®] , Q-Pap [®])	Non-steroidal anti-inflammatory drugs (NSAIDs) like Advil [®] and Aleve [®] reduce swelling, and acetaminophen works differently to manage mild to moderate pain. These are systemic and affect the whole body, like opioids, but do not contain narcotics and are not addictive.
TARGETED	Local anesthetic (eg, lidocaine) EXPAREL , a long-acting local anesthetic	Unlike systemic medications, these work directly at the surgical site to numb the nerves that cause pain. They also do not contain narcotics and are not addictive.

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OPIOID FREE

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TYPES OF OPIOIDS (NARCOTICS)

SYSTEMIC	Oxycodone (eg, OxyContin [®] , Percocet [®]) Hydrocodone (eg, Vicodin [®] , Lortab [®]) Hydromorphone (eg, Dilaudid [®]) Merperidine (Demerol [®]) Morphine (similar to heroin) Codeine Fentanyl Methadone	These attach to nerve cells in the brain and spinal cord. There they block pain signals from reaching the brain. "Systemic" means they affect the whole body. People may become dependent or addicted to opioids, even if they are only used for a short time.
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What does my health care provider need to know about me to help customize my pain management?

Your medical history is important to share with your physician to better understand your treatment needs. Things to consider include a history of gastrointestinal (GI), heart, liver or kidney issues; allergies to certain medications; and any current medications (for pain or otherwise) you are taking.

What can I expect in the first few days after I leave the hospital?

Asking this question will help you find out more about transitioning back to your home and your usual routine after your C-section or other surgery.

What can I expect in the first few weeks during my recovery?

This question can help you understand how long it might take for you to get back to doing the things you love, including taking care of your newborn.

If this is my second C-section, should I expect the recovery to be different?

If you've had a previous C-section, it's important to discuss how your pain was managed previously and any concerns, side effects, or any unexpected outcomes you may have experienced.

Tips:

- Be honest about your health habits. This will help your health care provider better understand what is right for you
- Be open about any concerns you may have. Don't be afraid to ask about your options, including opioid alternatives. Talk to your doctor to see if EXPAREL is right for you
- Be confident about getting the information you need and have your health care provider clarify anything you don't completely understand

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Talking Points for Your Next Appointment

I am interested in receiving EXPAREL

EXPAREL is a non-opioid treatment option administered during surgery. It delivers long-lasting pain relief and reduces or eliminates the need for opioids after surgery. It is important to know that you can receive a spinal/epidural for pain during the procedure, and still receive EXPAREL. **Let your doctor know in advance if EXPAREL is something you'd like to have during a procedure.**

I am concerned about having side effects with anesthesia and/or pain medications

Let your doctor know if you have experienced any side effects with anesthesia and/or pain medications in the past.

I would like to avoid taking opioids/narcotics whenever possible

Some patients do not like the idea of taking opioids/narcotics for several reasons. Opioids can cause drowsiness or fogginess, constipation, and nausea. Some people develop a tolerance to opioids and might need higher doses to get the same relief. And some people worry about becoming addicted to opioids or about their medications being misused by others.

I need to get back to normal life as soon as possible (ie, I have children at home and want to try to get back home quickly).

Certain pain management devices and medications, and their side effects, can affect your recovery time.

EXPAREL is indicated for single-dose infiltration in adults to produce postsurgical local analgesia and as an interscalene brachial plexus nerve block to produce postsurgical regional analgesia. Safety and efficacy have not been established in other nerve blocks.

Important Safety Information

EXPAREL should not be used in obstetrical paracervical block anesthesia.

In studies where EXPAREL was injected into the wound, the most common side effects were nausea, constipation, and vomiting.

In studies where EXPAREL was injected near a nerve, the most common side effects were nausea, fever, and constipation.

EXPAREL is not recommended to be used in patients younger than 18 years old or in pregnant women.

Tell your health care provider if you have liver disease, since this may affect how the active ingredient (bupivacaine) in EXPAREL is eliminated from your body.

EXPAREL should not be injected into the spine, joints, or veins.

The active ingredient in EXPAREL:

- Can affect your nervous system and your cardiovascular system
- May cause an allergic reaction
- May cause damage if injected into your joints
- Can cause a rare blood disorder

*The clinical benefit of the decrease in opioid consumption was not demonstrated in the pivotal trials.