Continuous thoracic ESP catheter for revision T5—T6 paraganglioma resection with neuromonitoring constraints: a case.

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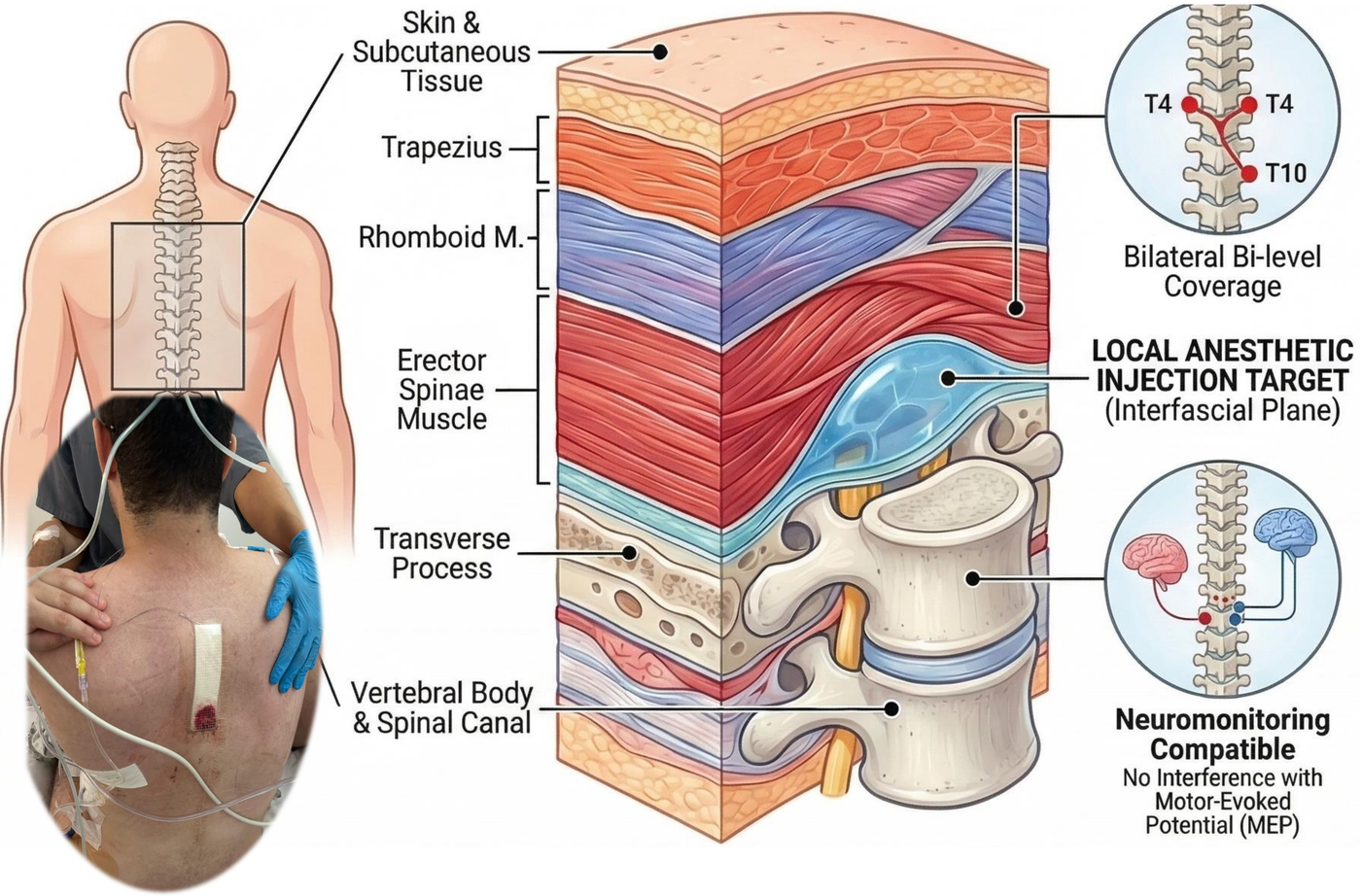

Timepoint	Analgesia strategy	Pain/Function	Key events
End of surgery	Thoracic ESP catheter started (continuous + bolus)	—	MEP monitoring constraints; major bleeding/transfusion
POD 0–1	ESP infusion + PCA rescue PRN	Sat up, started physio within 24h	Minimal opioid rescue
POD 2	Increased infusion/bolus for breakthroughs	Pain during drain/physio	Breakthrough episodes
POD 2–3	PONV episodes	Loss of block effect	Suspected leak/migration; pain ↑ to ~5/10
POD 5	Systemic opioid recommended by ICU team	Patient intermittently refused if pain ≤4/10	Intermittent rescue use
POD 7 / discharge	Drain removed; PRN opioids	Ambulating, independent bathroom	Pain ~4/10, no neuro deficit

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