The management of acute pain secondary to traumatic injury represents a major medical challenge. Traumatic injury results in acute inflammatory pain and early, adequate treatment can help limit sensitization which can eventually lead to a chronic pain state. Most commonly, opioids and local anesthetics are used as pain reducing agents but these medications are at best modestly effective. Current clinical practice is advocating for a multimodal approach to pain management to take advantage of the synergistic effects of various pharmacologic agents to help achieve early and adequate pain control. Opiates are known to have many deleterious side effects that increase morbidity and mortality; therefore pain management regimens that are multimodal and “opioid sparing” could result in improved patient outcomes.