

Enhanced Recovery for Surgery

A GUIDE TO PREPARING FOR YOUR PROCEDURE



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What to Expect

You and your doctor have decided you need surgery. This booklet will help you understand what to expect before, during and after your procedure.

Your healthcare team includes many different people, working together to provide care. This includes fellowship trained surgeons, board certified physicians and compassionate nurses, dietitians, case managers, social workers and additional health professionals across multiple disciplines.

Your care plan will address your individual medical needs and is comprised of industry best practices, clinical protocols and evidence based guidelines.

Part of your care plan includes an enhanced recovery approach for surgery, designed to improve recovery. This allows for more effective pain management, fewer complications, and increased communication and collaboration.

Many patients are pleased to learn the enhanced recovery approach includes:

- **Liquids before surgery.** You can have clear liquids up to four hours before surgery.
- **An earlier start to pain control.** Post-operative pain will be managed by giving pain relievers before or during surgery. This will increase the amount of medication in your blood and make you more comfortable after surgery.
- **Faster return to eating.** You can start eating and drinking easy-to-digest food and liquids after surgery.
- **Post-surgery activity.** After surgery, you will spend several hours a day up in a chair or walking in the hall.
- **A shorter hospital stay.** Before going home, your pain will be controlled so you can return to many of the activities you enjoy.

The Month Before Surgery

Being healthy before surgery will help with recovery.

HERE ARE A FEW WAYS TO IMPROVE YOUR HEALTH:

Start walking

It is important to be up and active after surgery. Activity will help prevent blood clots and pneumonia. If you do not already exercise daily, now is a good time to start. Walking now will make it easier for you to reach daily goals after surgery. Walking can also help you emotionally prepare for surgery. Walking with a friend or family member is a good time to talk about concerns you may have about surgery. If you are just starting to exercise, try to walk five minutes the first day. Increase the duration and frequency until you are walking ten minutes, three times a day.

Stop Smoking

Smoking increases your risk of breathing problems. You will not be allowed to smoke while you are in the hospital and that can be physically and emotionally stressful. Carle has resources to help you reduce or quit smoking. If you are interested in help, ask your doctor or nurse for more information.

Decrease Alcohol Consumption

If you regularly consume alcohol, now is a good time to stop. Drinking alcohol can increase the amount of time it takes your blood to clot. It also increases your risk of bleeding problems.

Control Blood Sugars

Elevated blood sugars can slow the healing process. If you have diabetes or pre-diabetes, speak with your primary care provider to make sure your blood sugar is in good control before surgery.

PAPERWORK

Before you come in for surgery, you may have paperwork that needs to be completed for your insurance, employer or for your caregiver.

Carle Patient Financial Services can assist you with the following paperwork:

- Family Medical and Leave Act (FMLA)
- Short Term Disability Insurance
- Major medical policies
- Supplemental medical policies
- Advance Directive

If any of the forms require a physician signature, Patient Financial Services will route the paperwork to your surgeon. You will be notified when the papers are ready for pickup. If the paperwork needs to be sent directly to your employer, Patient Financial Services will notify you when it has been sent.

Help Before and After Surgery

Now is a good time to think about what kind of help you might need before and after your surgery.

Questions to ask include:

- Who will take you to the hospital?
- Who will be with you during the recovery period?
- Who will bring you home?
- Who will be with you after you get home?
- Is there someone to help you with chores such as laundry, housework, grocery shopping or yard work?
- How will I spend my time after surgery to stay busy? Whether you choose to read a new book, take up knitting or complete math or word puzzles - it's best to get these items ahead of time.

If you have trouble finding help, Carle social workers may be able to assist you with finding resources.

Timelines, Tasks and Goals

It can be overwhelming to remember everything.

To help you and your caregivers, a checklist has been put together to guide you through preparing for your procedure. As the book progresses, goals and guidelines are included throughout the surgical and recovery process.

THE WEEK BEFORE SURGERY

- ☐ Complete pre-operative physical.
- ☐ Receive your stoma marking (if needed).
- ☐ Ask a loved one to help you gather things you might need after surgery such as:
 - A thermometer
 - A bottle of Milk of Magnesia
 - A bottle of ibuprofen, 200 mg tablets (Advil®, Motrin®) and acetaminophen, 500 mg tablets (Tylenol®)
 - If diabetic, a glucose meter
 - Ginger ale, ginger tea or ginger candy
 - Chewing gum
 - Protein drinks (Ensure®, Boost®, Glucerna®)
 - Non-carbonated beverages (juice, Gatorade™)
 - Easy to prepare soft foods such as yogurt, rice, bananas, soups.
- ☐ Pack your hospital bag including comfortable clothes to wear during your stay. Suggestions include sweat pants and a loose shirt.
- ☐ Do not use a razor on your neck or body for 72 hours before surgery. You may shave your face, but not your neck or below.
- ☐ Plan ahead so you have clean sheets for your bed and clean pajamas. You will need these fresh, clean items for the night before surgery.
- ☐ Purchase Hibiclens liquid soap in the first aid aisle of any local drug store. You will need to bathe with it the day before surgery.

THE DAY BEFORE SURGERY

Diet

- ☐ You need to follow a clear liquid diet. Please see the instructions on the insert.
- ☐ You do not need a clear liquid diet.

Bowel Prep

- ☐ You need to do a bowel prep before surgery. Instructions can be found on the bowel prep insert.
- ☐ You do not need to do a bowel prep.

Bathing

- Do not use a razor on your neck or body for 72 hours before surgery. You may shave your face, but not your neck or below.
- You will need to shower the night before and the morning of surgery using 4% Chlorhexidine (Hibiclens) liquid soap. You can buy the soap at any local drug store in the first aid section. Cost is \$8-10.
- Wash with soap starting from neck down including armpits, groin, back and feet. Apply the soap with hands or clean wash cloth. Allow soap to stay on skin for one minute before rinsing off. Your skin may feel slightly sticky.
- After you shower, do not sleep with pets or let them lay on or with you.
- After you shower, wear freshly laundered pajamas and sleep on fresh bed sheets.
- Do not apply lotions, powders, deodorant, perfume or make-up the day of surgery.
- Wear clean, loose fitting clothing the day you report for surgery.

DAY OF SURGERY

- ☐ On the morning of your surgery, shower the same way as the night prior, using the Hibiclens soap.
- ☐ Drink 1 large or 2 small ENSURE® Clear drinks, three hours before the scheduled surgery.
- ☐ After you finish your protein drinks, take two more 500 mg tablets of acetaminophen with water.

Any medication you need to take the morning before surgery must be taken at least three hours before surgery. They must be taken with your water, or ENSURE® Clear protein drink.

- ☐ Do not apply lotions, powders, perfumes or make-up the day of surgery.
- ☐ Wear clean, loose fitting clothing to report for surgery.
- ☐ Bring a list of your medications including dose(s) and times you take them.

EVENING OF SURGERY

Goals

- ☐ Spend at least 2 hours out of bed this evening.
- ☐ Work on breathing exercises using your incentive spirometer at least 10 times every hour while you are awake.
- ☐ You can drink as soon as you wish after surgery. A few hours after that, you may be able to eat a regular diet. Small amounts are best rather than a large meal. Stop eating if you feel full or nauseous.
- ☐ Regularly scheduled acetaminophen will be given. Your care team will check on you regularly to discuss comfort and concerns.

POST-OP DAY 1 - FIRST DAY AFTER SURGERY

Goals

☐ Up in the chair for 6 hours total.

☐ Walk at least 4 times in the hall.

Remember: Soreness is to be expected but it should not limit your ability to be active.

☐ Drink at least 2 protein drinks a day.

☐ Drink non-carbonated drinks up to 68 oz per day.

☐ Urinate after catheter is removed.

☐ Chew gum if you enjoy it.

☐ If applicable, learn how to empty your stoma pouch. Learn how to measure the output and record it compared to your intake.

POST-OP DAY 2 - SECOND DAY AFTER SURGERY AND FOR THE REST OF YOUR STAY

Goals

- ☐ Up in the chair for 6 hours total.
- ☐ Walk at least 4 times in the hall.
- ☐ Drink at least 2 protein drinks a day.
- ☐ Drink non-carbonated drinks up to 68 oz per day.
- ☐ Learn how to give blood thinning shots (enoxaparin/Lovenox®), if needed.

Before you can go home you must:

- ☐ Be eating and drinking a light diet.
- ☐ Walking in the hall.
- ☐ Have your pain controlled.
- ☐ Not have a fever.
- ☐ If applicable, be comfortable with stoma care.
- ☐ Pass gas.

GOING HOME AFTER YOUR SURGERY

Activity

- After you leave the hospital, you should maintain a certain level of activity. Your risk of blood clots does not go away once you go home.
- You need to keep up with your deep breathing exercises. Please take your incentive spirometer home with you.
- No lifting greater than 10-15 pounds for 6 weeks.
- Some medications may affect your ability to think clearly, drive or operate machinery. Avoid driving for at least the first week after surgery or until your follow-up visit.
- It is normal to feel tired; you may need to take naps or rest during the day.
- You may walk flights of stairs, perform non-strenuous activities, ride in a car and shower.
- Continue to walk frequently and increase your stamina.

Diet

- Small frequent meals may be more easily tolerated after abdominal surgery. Avoid large meals.
- Drink plenty of fluids. Avoid caffeine, alcohol and fluids with high sugar content because they can cause increased urination, diarrhea, and dehydration. Water, Crystal Light™ and/or sports drinks (Gatorade™) are good choices. Sugar-free or low sugar sports drinks are better.

Incisions

- Wash your incisions everyday with soap and water. Do NOT use peroxide on your wounds unless advised by your surgeon.
- You may have some clear, yellow or bloody drainage from your incisions. This is particularly common near your umbilicus (belly button). It will usually increase as your activity increases. It should last a couple days and then go away.
- You may see some redness along the edge of your incision(s). This is normal. If your incision becomes warm, or the red color begins to spread, call your surgeon's office.
- If you have staples, they will be removed at your first post-op visit. Some surgeons will apply little strips of tape to the incisions. You can remove the strips at home after one week.
- If your temperature is 101°F or higher, and acetaminophen will not lower it after 12 hours, please call the office.

- Unless told otherwise, you may shower. Do NOT take baths, sit in a Jacuzzi or hot tub or swim until your surgeon gives you the OK.
- The incision does not need to be covered. If there is a small amount of drainage, cover the area with gauze to protect your clothing and prevent rubbing.
- If you notice thick, dark yellow drainage, smelly drainage or see redness at or around the incision (like a spreading sunburn), call your surgeon's office. These may be signs of infection.
- Most healing takes place by 6 weeks after surgery. The scar will continue to soften, and the skin will become lighter in color over the next year.
- Keep your incision covered from sunlight for the first few months, or use sunscreen to protect your newly healed skin from sunburn.

If you had a hysterectomy or vaginal surgery:

- No intercourse
- No douching
- No tampons
- Do not put anything in the vagina

Your care team will discuss when it is safe to resume certain activities.

Pain Control

- Pain from the incision is normal. The pain will vary with activity, but should decrease over time.
- Mild crampy abdominal pain and bloating are normal. This should improve slowly. Eating several small meals instead of a few large meals will help prevent bloating. Walking before and after meals will also help.
- Many pain medications can cause constipation. Drink plenty of fluids and take stool softeners and/or laxatives as instructed. Stop taking stool softeners if you develop loose stools.
- Take your medication as prescribed.
- Some medications may affect your ability to think clearly, drive or operate machinery. Do not drive or drink alcohol until your provider says it is safe to do so.
- Non-steroidal anti-inflammatory medications (NSAID's), such as ibuprofen, may be prescribed. NSAID's are good for minor pain and will not alter your ability to think clearly. Common brands are Advil® and Motrin®.

- Acetaminophen (Tylenol®) is also an excellent pain reliever for minor pain. Do not take acetaminophen while taking Percocet® or Norco® or other medications that contain acetaminophen. Taking more than 4,000 mg of acetaminophen in 24 hours can cause severe liver damage.
- If your pain becomes progressively worse, or if you develop nausea and vomiting, call your surgeon's office.

Bowel Movements

- After abdominal surgery your bowel movements (BMs) may not be regular. You may have loose stools or constipation. Your surgeon may send you home with medicine or ways to help with these problems.
- Your first bowel movement may not happen up to four days after surgery.
- If you have not had a bowel movement after four days, take a laxative. If you do not get results, please call the office.

Medications

- Federal laws do not allow for some medicines to be called into a pharmacy. Instead, you must pick up a signed prescription from our office. Your doctor will tell you if this applies to you. Please allow 2 business days for refills.
- For the first couple days, continue to take the recommended dosage of medication containing acetaminophen (Tylenol®).
- You may take 3-4 tablets (200 mg each) of ibuprofen (Advil®, Motrin®) every 6 hours. You may take this in addition to or instead of your other pain medication. People who have a history of ulcers or kidney problems should NOT take this or other medications like this.
- You may have been prescribed a blood thinner such as enoxaparin/Lovenox®, Arixtra® or Xarelto®. Please take these medications as directed to prevent blood clots. You will bruise easily while on the medication.

Follow-up Appointments

- You will get a phone call from the clinic after discharge to have a follow-up appointment scheduled. If you do not receive a call within a few days, please call the office to schedule an appointment.
- You will have additional follow-up appointments with your care team after surgery.

If you have any questions/concerns, call:

Carle Patient Advisory Services at (217) 383-3233 after-hours, including weekends.

Notes

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Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-217-383-2543.

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