

Patient Information Leaflet

ENHANCED RECOVERY PROGRAMME FOR COLORECTAL SURGERY

Produced By: Surgical Unit

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Introduction

The aim of this booklet is to help you understand the enhanced recovery programme and how you will play an active part in your recovery after bowel surgery. The enhanced recovery programme is different to traditional care and can improve your recovery considerably. Research indicates that recovery after bowel surgery is easier and happens more quickly if certain things are introduced:

- Good advice and information prior to your operation
- Carbohydrate rich drinks before your operation
- Effective pain relief
- Commencing drinking and eating at an early stage
- Getting out of bed and walking regularly after your operation

These simple steps will speed up your recovery and help to reduce the risks of complications such as chest infections or muscle wastage.

We ask patients to take an active role in their own recovery and to work in conjunction with the multidisciplinary team (eg doctors, nurses, physiotherapists) to help achieve this.

Pre-assessment Unit

Your appointment in the Pre-assessment unit (PAAU) is the next step following your decision for surgery. At this appointment you will be given relevant information about your surgery and nursing care. Any necessary investigations will be carried out at this time in order to prepare you for your operation.

Before your operation it is beneficial for you to try and make yourself as fit as possible. You can do this by eating a mixed healthy diet and if you have lost weight (without meaning to) it is helpful to try and increase your weight. If you smoke it is ideal to give up smoking as soon as you can before your operation. It is also useful to increase exercise, even a 30 minute walk every other day is a good start.

The nurses will give you advice on:

- Stopping smoking and reducing alcohol intake
- Exercises to improve your recovery following surgery
- Eating and drinking before surgery
- Carbohydrate drinks before surgery (They will be supply these.)
- Bowel preparation if required

Please bring in all your medication with you, including herbal tablets, in the original packaging. We will go through your medication with you and tell you if any need to be stopped before your operation.

Prior to some operations bowel preparation will be required. You will be told by the nurse in pre-assessment whether you need bowel preparation.

The nurse will talk to you about your plans for discharge from hospital. You will need to make arrangements for family or a friend to support you in the days after leaving hospital. You will also be asked for contact details of the person who will take you home from hospital. If you think there may be any problems with your discharge home after your operation please inform the nurse.

If your operation involves you having a stoma you will be referred to the stoma team. The stoma team will arrange to see you before your operation to discuss living with a stoma, answer your questions and demonstrate the use of the stoma appliances. They will also put a mark on your abdomen at this time, to mark the site of the stoma if required. The stoma team will continue to support you after your operation

Surgical Ward

Our unit accommodates patients for surgery. We have male and female patients cared for in single sex bays or individual rooms.

If you arrive on the ward and a bed is not immediately available you will be asked to wait in the day room until a bed is ready.

Please bring the following items with you:

- All your medication in the original packaging
- Comfortable day clothes and shoes
- Nightwear, dressing gown and enclosed slippers.
- Toiletries and towel.

Please do not bring in expensive jewellery, valuable personal belongings or large amounts of cash. We would recommend that £10 - £15 at any one time would be adequate to purchase TV cards, newspapers, magazines, etc.

Admission for your Operation

On arrival to the ward you will be introduced to the nurse caring for you and shown around the ward. You will be given anti-embolic stockings to wear to reduce the risk of blood clots developing in your legs.

You will normally be able to eat up to 6 hours and drink clear fluids up to 2 hours before your operation providing you do not need a laxative bowel preparation. You will have the carbohydrate drinks (Preload) the night before and 3 hours before your operation unless you are on medication for diabetes.

If you require an enema to clear the lower part of your bowel prior to your operation this will be administered on the ward a couple of hours before your surgery. However some patients will require full bowel preparation with laxative medicines. This medication will be administered to you the day before your operation when you have been admitted to the ward. If this is the case you will need to be on clear free fluids only during this period. This preparation gives you loose watery stools and it is important that you drink plenty during this time.

You will be asked to put on a hospital gown prior to being escorted to theatre for your operation.

Immediately After Your Operation

When you wake up you will be in the recovery room before returning to the ward. You will have oxygen running through a face mask or nasal cannula. It is important that you start your deep breathing exercises as soon as possible to help reduce the risk of getting a chest infection. Support your abdomen, slightly bend your knees and lower your shoulders. Breathe in through your nose and out through your mouth slowly. Do these 3 times then “huff” with your mouth as though trying to clean your glasses. Repeat the whole process twice an hour.

Good pain control improves your recovery. You may have pain relief from an epidural (which is a tiny tube in your back) which provides a continuous supply of pain medication. Alternatively you may have a patient controlled analgesic (PCA) device. This has a button that you press to give yourself pain relief. In addition you will be given other pain relief via mouth. The type of pain relief used depends on the type of operation you have and will be discussed with you before the operation by the anaesthetist.

You will have a drip in your arm will ensure that you receive adequate fluids until you are able to drink for yourself. You will have a urinary catheter in your bladder so that the staff can monitor how well your kidneys are working. Your wound will be covered by a dressing.

Your respiration rate, blood pressure, pulse, temperature and oxygen saturation levels will be recorded regularly along with your urine output. Please be aware that the staff will wake you during the night to continue these vital observations.

You will be encouraged to eat and drink as soon as you feel able and may be given a drink in recovery when you wake up after your operation. If you feel sick, please tell a member of staff and we will offer you some anti-sickness medication if necessary.

You will be encouraged to walk with the physiotherapist or a nurse. If your operation was in the morning, you will be taken for a short walk on the evening of surgery. If your operation was in the afternoon your first walk will be the following morning.

During the 6pm drug round you will be given an injection in your tummy to reduce the risk of blood clots developing.

Subsequent Days After Your Operation

Your epidural or PCA, if present, will stay in for about 48 hours until you can walk comfortably. Tablets will be given regularly for pain relief, please take these when offered, even if comfortable at the time, as it is vital for your recovery. The acute pain team will visit as required (Monday – Friday).

Continue your breathing exercises and cough when you need to by holding your abdomen to help reduce the pain.

You will be encouraged to eat and drink normally as long as you don't feel sick. High energy drinks are provided, try to drink at least two of these a day. We encourage you to have your meals in the ward day room if possible.

The drip will come down once you are drinking well. The catheter will come out once you are mobilising and the epidural (if present) has been removed.

It is important that you wear your day clothes whenever possible as this will help you feel positively about your recovery.

On each day after your surgery, if you feel well enough, it is advised that you sit in the chair for a few hours in the morning and afternoon, resting on your bed as needed. We will help you build up your walking until you are able to walk normally. You will be encouraged to walk along the corridor and back (about 60m) four times a day. By being out of bed and walking regularly, your breathing is improved and it lessens the chance of developing a chest infection or clots in your legs. It also helps with your bowel function.

You will continue to receive the injections to reduce the risk of blood clots. If the team consider it necessary you will be taught to administer your own injections so that injections can continue for up to 4 weeks after you go home.

You will have regular blood tests and be seen daily by the surgical team.

If you have a stoma we will expect you to change your stoma appliance under supervision twice a day until you feel confident to do it on your own. You will be supported by both the ward staff and stoma team during this time.

We will check your understanding of your progress and answer any questions that you may have. Please do not hesitate to ask us anything.

We will ask you again about your discharge arrangements.

Intensive Care (ITU)

Sometimes after surgery it is necessary for patients to go to ITU for closer monitoring, this may be discussed with you prior to your operation or a decision made by the team on the day of your operation.

Going Home

You will be ready to go home when:

- You are walking independently
- You are eating and drinking
- You have passed wind (flatus)
- Your pain is adequately controlled by pain killers
- Your blood tests are ok and you don't have a temperature
- You are able to care for your stoma if present
- The necessary support is available at home

Your GP will be informed about your surgery following your discharge from hospital. We will provide you with a supply of any medication that you require.

An outpatient appointment will be made and either posted to your discharge address or given to you by telephone.

You will be given the contact number for the ward that you can ring for up to 10 days following discharge from hospital if you have any concerns (see end of leaflet).

You will need to ring your GP practice for a practice nurse appointment so that your wound can be reviewed or a district nurse visit may be arranged. This will be discussed with you by the ward staff prior to your discharge.

Please advise staff if you require a sick note. Many people are able to return to work within 6-8 weeks of surgery. If your job involves heavy, manual labour this period may be longer. Do not drive until you are confident that you can do an emergency stop comfortably. It is best to check with your insurance company before you start to drive again.

At Home

Please continue with the exercises that the physiotherapist has given you. Try not to hurry your recovery but steadily increase the amount you do and rest in between. Feeling physically tired after an operation is natural. Try to get family or friends to help out with household chores such as hoovering and shopping. Avoid heavy lifting for a minimum of 6 weeks.

Continue to wear your anti-embolic stockings for at least 2 weeks. This with regular exercise will help prevent the risk of blood clots (deep vein thrombosis). It may also be necessary to continue the injections in your tummy for up to 4 weeks to help reduce this risk.

Good nutrition plays a vital part in your recovery. You may find that it takes weeks before your appetite returns to normal. Try eating small meals frequently. You can add snacks of plain biscuits, crackers and scones between meals. Sufficient food intake helps prevent tiredness and promotes a faster recovery.

Following a bowel operation you may experience loose stools and an urgency to go to the toilet. It is important to remember that this may continue for a few months and is normal. If you have a stoma, the stoma nurses will follow you up at home or in clinic.

Complications do not happen very often but it is important that you know what to look out for:

- It is not unusual to suffer gripping abdominal pain which should only last a few minutes; this is OK. Severe pain that lasts for several hours within two weeks of your operation may indicate a leakage of fluid from where the two pieces of bowel are rejoined. You may get a fever with this or feel generally unwell. Please contact us immediately.
- Your wound may be slightly red and uncomfortable for the first two weeks; this is OK. Please contact us if your wound becomes inflamed, swollen, painful or is leaking fluid.
- Your bowel habit may change as part of your bowel has been removed. Ensure that you eat properly and take regular exercise. If you are constipated or have loose stools for more than 4 days please contact us for advice.

Contact Numbers:

 01983 822099

Please call this number and press option 1. Then put in the extension number 6701 or 6702 followed by the # key on your phone. This number can be used to reach the surgical ward 24 hours a day.

You can find more information on all sorts of health issues through NHS interactive available through Sky TV or online at: <http://www.nhsdirect.nhs.uk/>

For Health advice and out of hours GP service please call Island Health Line on 0845 6031007

We Value Your Views On Our Service

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the Patient Advice and Liaison Service. If you wish to contact them directly, telephone on 524081, extension 4850. Alternatively you may prefer to write to:

Chief Executive
Isle Of Wight NHS Primary Care Trust
St Mary's Hospital
Newport
Isle of Wight

All NHS sites are no smoking areas.
If you would like help and advice to stop smoking please call:
01983 814280 or 07919 598549

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