

NHS Forth Valley

Colorectal Surgery

Pre Operative Information

Patient Information

A decorative graphic at the bottom of the page consisting of two overlapping, stylized blue waves. The waves are light blue and have a soft, rounded appearance, creating a sense of movement and flow.

This leaflet gives you important information on helping you towards a swift and full recovery after your operation.

If you have access to the internet, have a look at our You Tube information clip on: [www/youtube.com/forthvalley/enhanced recovery](http://www.youtube.com/forthvalley/enhanced%20recovery)

For patients undergoing bowel surgery, there are two main aims:

- To improve the recovery and minimise stay in hospital
- To achieve the optimum recovery following surgery, patients are encouraged to work together, in partnership with the Colorectal team.

Other important elements to recovery are:

1. Pre-operative assessment and planning.
2. Reduction in wound size, for quicker more effective healing.
3. Good care planning and pain relief post-operatively.
4. Early mobilisation (getting patients out of bed and moving around) and return to eating and drinking.

Early mobilisation has been shown to be particularly important for reducing fatigue, reducing the risk of chest infection, DVT (Deep Vein Thrombosis) or a PE (Pulmonary Embolism). This together with shorter fasting times maintains both mobility and reduces muscle wastage.

Pre-Operative planning

Prior to your admission to hospital, arrangements will be made for you to attend a pre-operative assessment. A pre-op nurse will explain what you can expect to happen when you come into hospital and give you the opportunity to ask any questions.

At this assessment you will be asked to make arrangements regarding your transport to and from hospital. It would be a good opportunity to think about and discuss any issues you may have at home, for example, who will do your cooking, shopping or heavy housework when you are discharged home?

Preparing for surgery

The day before surgery you will be able to eat and drink as normal, you will also be given high carbohydrate drinks. These are an essential part of your care and help boost your energy prior to surgery.

Once you are in hospital, you will be given a blood thinning injection, to help reduce your risk of blood clots.

The day of the surgery

On the morning of your surgery you will need to have a further carbohydrate drink then fast (no food or drink) for approximately 2 hours.

In the anaesthetic room on the day of your operation, the anaesthetist may insert a small catheter into your back called an Epidural, which allows us to give you a continuous supply of pain relieving medication. The anaesthetist may decide upon an alternative to the Epidural such as a spinal or Patient Controlled Analgesia (PCA) whichever they think may best suit your needs. You will also be prescribed other types of pain relieving medications which work in different ways and will be given regularly.

Once you are asleep a urinary catheter will be inserted into your bladder, so that we can monitor your urine output.

Intra-venous fluids (through a drip) will be given during surgery; these will be stopped as soon as you are tolerating oral fluids. (Hopefully within a few hours of surgery).

Oxygen therapy will be given during and after your operation initially via a mask, this will continue until you no longer require it.

You may experience some nausea/sickness. However, medication will be given to help prevent this. This medication is important in order to allow you to feel better so that you can eat and drink as able, which in turn will aid you recovery.

After your operation you will usually be seen by the physiotherapists and you will be expected to commence deep breathing and leg exercises. It is important for you to follow their instructions to reduce your risk of chest infection and blood clots.

You will be given a respiratory exerciser (Spirometer) and will be shown how to use it. This will help to expand your lungs.

If you have your operation in the morning, around 6 hours after the operation you will be assisted out of bed and encouraged to sit up for 2 hours and move around as much as you are able.

If you have your operation in the afternoon mobilisation will commence the following day. However, you will be encouraged to move around in bed.

When you come back from theatre you will be commenced on high protein drinks which will continue until you are eating and drinking normally. It is important that you eat and drink early after your operation as your body benefits from optimal nutrition and this will help your overall recovery.

First day after surgery

Your urinary catheter may be removed depending on the type of surgery.

High protein drinks will be given. You will be encouraged to try diet and fluids as you are able to tolerate.

You will be encouraged to be up on this day for approximately 8 hours in total with rests in between.

You will be encouraged to walk (initially with assistance) short distances around the ward area.

Day 2

Your epidural may be removed; this is a simple painless procedure. Oral painkillers will continue to be given so that your pain is well controlled.

You should continue to eat and drink as able including high protein drinks.

You will be encouraged to be up again for 8 hours, with regular walks.

Depending on your overall condition your team will commence preparations with you and your relatives for discharge home.

Day 3

It is quite normal to feel a little tired and not yet have regained your full appetite. However, you may be discharged home today provided:

- You are fit and comfortable with discharge
- Your pain is well controlled
- You are eating and drinking
- You are passing wind or your bowels have opened
- You are passing urine without difficulty
- You are up and about and able to carry out activities such as washing/dressing.

When you arrive home

You will be given a clinic appointment for 4-6 weeks to see the Surgeon in clinic.

Notes

If you can't go let us know!

Every month around 2,000 people across Forth Valley fail to turn up for hospital appointments. This costs the NHS millions of pounds each year and increases waiting times. So if you are unable to attend or no longer require your hospital appointment please let us know so we can offer it to someone else.

We are happy to consider requests for this publication in other languages or formats such as large print. Please call **01324 590886 (9-5) to arrange this or email fv.disabilitydepartment@nhs.scot**

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