

Enhanced Recovery Programme for Colorectal Surgery

Introduction

When you are admitted to hospital for your bowel operation, you may be taking part in an enhanced recovery programme. The aim of this programme is to get you back to full health as quickly as possible after your surgery. This booklet has been designed to give you information about your forthcoming operation.

Enhanced recovery is effective because we:

- Give you good pain relief. This will allow you to get out of bed and walk around preventing you from getting clots in your legs and muscle wasting
- Teach you how to breathe more effectively which reduces the chances of developing a chest infection
- Offer, whenever possible, keyhole surgery so that you have smaller wounds. This
 should be less painful than an open wound, and will allow you to mobilise and deep
 breathe more easily
- Encourage you to eat and drink as soon as possible, so that you have more energy and your bowels recover from the operation
- Encourage you to mobilise as soon as you can, by sitting out of bed and having small walks throughout the day

Before you come into hospital

You will be involved in planning your care and recovery from the time that we see you in clinic. This is an opportunity for you to tell us all about your individual needs and circumstances at home.

It is important that you tell us as early as possible if you have any concerns about whether you will be able to manage your daily activities when you are discharged after your operation.

You should also let us know if any of your circumstances change during your admission.

We have a team of healthcare professionals who can help to organise whatever support you might need. These include the physiotherapy team, occupational therapists, social workers, and the discharge assessment team.

At the pre-admission/pre-clerking clinic, you will be seen by a doctor and a team of nurses to see if you are fit enough for operation. You will have a trace of your heart (ECG), blood tests and a chest X-ray as well as an examination.

You will also be given instructions about when to stop eating, what extra high calorie drinks to have and when and what to do on the day of admission to hospital.

Pl22/0953/05 Leaflet title: Enhanced Recovery Programme for Colorectal Surgery
Author: Catherine Jones Issue date: February 2023 Review date: February 2026

Information for Patients

If necessary, the nurses in pre-admission clinic will give you information about bowel prep if you need to this before your operation.

Stoma care

You will also be given a teaching session about managing a stoma if this is required. You will be given a teaching pack to take home with you so you can practise. This will help to reduce your stay in hospital after the operation.

Day before your operation

Unless instructed otherwise, you can eat normal food until 6 hours before your operation. After this time you will be asked to stop eating and drinking.

Unless diabetic, you will be provided with some carbohydrate drinks to take. These will help with your recovery. If you are admitted on the day of your operation you will need to drink two carbohydrate drinks on the evening before surgery, and two by 6am on the morning of surgery. If you come into hospital the day before your operation, the ward nursing staff will supply your drinks as needed.

Day of your operation

We may give you an enema if necessary to empty your bowel before you go to theatre. When you arrive back on the ward you will have several drips and tubes. They are all temporary and will be removed within 24-72 hours. This will include a catheter into your bladder to allow you to pass urine and possibly a drain into your abdomen (tummy).

Pain medication will be given either through an epidural, which gives you continuous pain relief in to your back, or a pump which is attached to a drip in your arm that you will need to press. This is called patient controlled analgesia or PCA. You will also be given tablets for pain and sickness when you are able to drink.

If you are thirsty you can have a drink and even have some food later in the day if you're feeling really well.

We would also encourage you to sit out of bed if you can as well as deep breathe to clear your lungs. Some patients can manage a short walk with help too.

The first post-op day

The nurses looking after you will encourage you to sit out of bed, gently mobilise and eat and drink.

The aim is for you to take at least three walks with the help of the nurses and physiotherapists. This will be tiring and you can rest in between. This may also make you feel sore, but you will have an epidural or PCA for any pain you may have. In addition, you will be asked to take regular oral analgesia alongside your epidural or PCA.

The physiotherapists will also give you some gentle breathing exercises to do, which should be repeated each hour. You should also point your feet up and down and circle your ankles in bed to reduce the risk of clots in your legs.

We will encourage you to eat a low fibre diet as this helps your bowel to recover more quickly and gives you energy to move around. You will be offered a light diet as you may not feel like having a big meal.

Information for Patients

High protein drinks will be available if you don't want normal food but can also be taken as 'extra' calories.

If you have had a 'stoma' or 'bag' as part of the operation, you will be seen by the specialist nursing team who will plan teaching sessions for you with the ward staff. Daily practices are important so that you are able to manage the stoma confidently when you go home. Therefore you will be expected to participate in daily bag changes up until your discharge.

The second post-op day

Your epidural or PCA will be removed today if your operation was done by keyhole surgery. You may have some pain, but it will become easier. You will still need to take regular painkillers so that you can walk around the ward, shower and sit up for your meals.

Any remaining tubes or drips will be removed and you will be encouraged with all of the above activities.

Most people are at least passing wind from their bowels by this point. You may feel more comfortable when you've opened your bowels normally.

The nurses will discuss going home with you and planning for this to happen within the next few days.

Day three onwards

If you still have your epidural or PCA, this will be removed, alongside any other tubes or drains that you may still have.

We will encourage you to increase your physical activity by walking around. This will help your bowels to recover and reduce the bloating of your tummy.

You will also be eating and drinking better and your confidence will increase.

This oral analgesia will continue once your epidural or PCA has stopped. You may still feel sore because of the operation so you need to take regular painkillers each time the nurses ask you to. These will continue when you go home.

Complications following surgery are all reduced as a result of increasing your activity levels as well as a shorter hospital stay.

Going home

You will be seen by the surgical team on a daily basis and they will allow you to go home if:

- You feel confident about managing at home
- You are passing wind and/or opening your bowels
- You are eating and drinking as well as carrying out normal activities like getting dressed
- You do not have a temperature or signs of a wound/chest infection
- You are walking around the ward fairly comfortably
- You are passing urine without difficulty
- · You are confident to manage your stoma if this applies to you

When you are discharged you will be given a weeks supply of tablets. It is important that you continue with the pain killers until you are comfortable. This will allow you to carry out

Information for Patients

normal activities at home such as bathing, dressing, making tea etc. If you need more, you will need to see your GP however, most patients find that the pain gets easier day by day. You will also be able to gradually increase your activity and exercise.

On discharge you will be given an instruction leaflet that tells you what to do if you start to feel unwell.

You will be seen routinely in the surgical clinic for follow up care.

Further advice

You will continue to improve at home but try not to do any heavy lifting for at least 3-4 weeks.

Try to eat healthily; foods rich in protein help you to get stronger and heal faster. These include milk, fish, meat, cheese and eggs.

If you have any concerns please contact the ward, or your Colorectal nurse.

Ward 728 telephone number: 0121 371 7297

Colorectal nurses: 0121 371 4501

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email <u>patientexperience@uhb.nhs.uk</u>.

Pl22/0953/05 Leaflet title: Enhanced Recovery Programme for Colorectal Surgery
Author: Catherine Jones Issue date: February 2023 Review date: February 2026