

Surgical Discharge Advice

General Surgery

Introduction

Patients are admitted to the surgical wards of this hospital for a variety of reasons, some come electively for operations, and some are admitted as emergencies and some of them need operations. Most people get no complications, but some do, and this guide should help if you get problems after you have gone home.

Pain management

All surgical wounds will cause some discomfort which may last for a few days. Pain relief advice can vary, please see below answers to some frequently asked questions.

- **Question:** I am in pain and have not been given pain relief tablets to take home. What should I do?
- **Answer:** A mild pain relief tablet such as paracetamol or ibuprofen should be enough to manage the pain you may experience, provided there are no reasons why you should not take them. The information on the packet and the leaflet inside it will advise if you should not take them, or will tell you how and when to take them. They can be bought over the counter at your local pharmacist or supermarket. Do not exceed the maximum stated dose.
- **Question:** I am in pain and have been prescribed, and given, pain relief tablets to take home from your discharging ward. How should I take them?
- **Answer:** Please take them as advised and do not exceed the stated dose.
- **Question:** I have taken pain relief medication and the pain persists. What should I do?
- **Answer:** Contact Surgical Same Day Emergency Care (SDEC), or your GP, or go to your nearest Urgent Care Centre. If the pain is severe and you cannot get help from anyone, go to your local Emergency Department (Accident and Emergency).

Wound care

As part of the healing process, it is normal for the wound to feel warm and appear red. Some bleeding or leaking can be expected from the wound, but this should settle in a few days. If this does not settle, please contact Surgical SDEC.

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

For most surgical wounds you will have a dressing in place. Keep your wound dry for 24 to 48 hours; you may then resume your normal washing routine. Do not soak in the bath or shower for long periods of time as this may cause a problem. You will have been given specific advice regarding how long to keep the dressing on, depending on the type of wound you have (see below); once the dressing is removed, leave the wound exposed.

Please keep your dressing in place until advised, you may then remove the dressing and continue to keep the wound clean and dry. Do not use harsh soaps or perfumes on or around the wound site. If you feel you are unable to manage your wound care at home or require regular dressing changes, please book an appointment with your Practice Nurse at your GP Practice.

If your wound starts to bleed, apply pressure with a clean towel (or a gauze swab if you have one) for 15 to 20 minutes. If the bleeding does not stop, please contact Surgical SDEC for advice.

Signs of infection in the wound may be:

- More redness or heat around the wound than what was present on discharge
- New pain
- Swelling
- A discharge from the wound
- A fever (temperature)

If any of these occur, then please contact Surgical SDEC for advice.

Eating and drinking well

Your body will need energy for repair. It is important that you are well nourished and well hydrated to help the healing of your wound and your overall recovery.

Managing nausea

Some people have an upset stomach after surgery. This is often because of anaesthesia, pain, or pain medicine, or the stress of surgery. These tips will help you to handle nausea and eat healthy foods as you get better. If you were on a special food plan before surgery, ask your healthcare provider if you should follow it while you get better. These tips may help.

- Do not force yourself to eat. Your body will tell you when to eat and how much
- Start off with clear liquids and soup. They are easier to digest
- Next try semi-solid foods, such as mashed potatoes, apple sauce and gelatine, as you feel ready and able
- Slowly move to solid foods. Do not eat fatty, rich or spicy foods at first
- Do not force yourself to have 3 large meals a day. Instead, eat smaller amounts more often
- Take pain medicines with a small amount of solid food, such as crackers or toast, to prevent nausea

Your bowels

Your bowel habits may change following surgery. Your motions may become loose, or you may experience constipation. Your bowels may be unsettled for up to 2 weeks after your surgery. Make sure you eat regular meals, three or more times a day and take regular walks during the first two weeks after your operation. If you have persistent diarrhoea for more than three days or if you are constipated for more than three to four days, contact Surgical SDEC. If you need a laxative, a stool softener such as Laxido or Lactulose are recommended. Both are available without prescription.

Passing urine

Sometimes after surgery, you may experience a feeling that your bladder is not emptying fully. This usually resolves with time. If it does not or if you have excessive stinging when passing urine, please ring Surgical SDEC for advice.

If you go home with a catheter following a urology procedure, it is normal to occasionally notice some blood in your urine. This can occur for a week or two. Drink plenty of fluids to help flush any blood or small clots out of your bladder. If bleeding persists or you notice bright red blood, contact Surgical SDEC or attend your nearest Emergency Department.

Exercise

Activity is encouraged from day one following your surgery. You should take regular exercise daily. Gradually increase your exercise following your operation until you are back to your normal level of activity. The length of time you will need before you get back to normal will depend on how big your operation was: it could take up to six weeks. Do not undertake heavy lifting until six weeks following your surgery. If you are planning to jog or swim, wait until two weeks after your surgery and then start gradually. Common sense will guide your exercise and rehabilitation. If your wound is uncomfortable, go easy with your exercise. Once your wound is pain free, you can undertake most activities. Continue to wear your support stockings for two to three weeks (as advised)

Driving

Do not drive until you are confident that you can do so safely and make an emergency stop; this is usually four to six weeks. You should check with your insurance company before you start driving again.

Compression stocking and Enoxaparin

The risk of developing blood clots can continue for up to six weeks after you have gone home. A blood clot is more likely to happen when you are not moving around very much. When you are inactive for longer than normal, blood tends to collect in the lower parts of your legs. The blood moves around the body more slowly and can trigger a blood clot (also known as a thrombus).

Make sure that you remember to walk around and do leg exercises as much as you are able. If you have been asked to wear support stockings at home, please wear them for the recommended time (usually two to three weeks after your operation).

Enoxaparin (Clexane injections) are given to help prevent blood clots. If you have been discharged with Clexane injections, you must complete the course. You will have been provided with the correct number. Once you have administered the last dose, please close your sharps bin and place it on the doorstep on the allocated collection day (refer to the council form given to you on discharge) for your local council to collect.

Deep breathing

Sitting fully upright tends to be the best position for these exercises. Ensure you have adequate pain relief as deep breathing can be uncomfortable.

- Support your abdomen with a towel or a pillow and your arms, bring your knees up slightly and lower your shoulders
- Breathe in deeply, feeling your lower chest expand as far as possible. Try to keep your neck and shoulders relaxed
- Hold the breath for up to three seconds
- Let the air out forcefully through your mouth in an even stream
- Repeat this three times and then return to breathing normally

Return to work?

The time when you will be fit to go back to work will depend on the operation you had, whether it was a planned or an emergency procedure and, on your health beforehand. It also depends on the work that you do; an office job is less physically demanding than heavy work. Take the advice given by the Doctors and Nurses looking after you.

If you have any concerns within 10 days of your discharge from hospital, call the Surgical SDEC triage telephone line for advice and further management of symptoms. Our Surgical Nurse Practitioners will advise on further assessment in Surgical SDEC, by your GP, District Nurses, Pharmacist, or can refer you to the Emergency Department if urgent assessment is required.

Surgical SDEC

New Cross Hospital

Ward A16

Opening Hours:

Monday-Sunday

08:30-20:00 (Last referral at 18:00)

Useful Contact Numbers

Surgical SDEC: 01902 481940

24 Hour Mobile: 07876392180

If a follow up appointment with your Consultant is required following your discharge and has not been received within 4 weeks, please contact the Consultant's Secretary via switchboard to assist you.

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English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。