

# Enhanced Recovery After Surgery (ERAS)

## Discharge Booklet Post-Op Patient Information

Congratulations! You are ready to go home from the hospital to continue your recovery. Recovery takes time and will vary for each person. This may be due to your age, overall health, type of surgery and any issues you may have had after your surgery. You have just had major surgery and your body needs time to heal and adjust. You should see slow and steady recovery over the next few weeks. Please give yourself time to heal after surgery!



### ***Follow-Up Appointments***

Please call to set up your own appointments that work with your schedule.

Please see your family doctor in: \_\_\_\_\_

Please see your surgeon in: \_\_\_\_\_

We wish you well in your recovery. If you have questions or concerns, please contact your family doctor or surgeon as soon as possible.

*Thank you from your Surgical Team*

## **Diet and Bowel Function**

After surgery, it will take time for you to fully regain your appetite. This should improve as you continue your recovery at home. You may need to eat smaller meals more often throughout the day instead of three big meals at breakfast, lunch and dinner. You may also use drinks such as Boost® or Ensure®, at home. If you are concerned about your diet, our hospital dietitian can provide you with a food guide prior to going home. Please drink up to 2 to 3 litres of water a day at home. Do not drink alcohol, especially if you are taking pain pills.



Your bowel movements may be unpredictable for the first couple of weeks, ranging from diarrhea to constipation. You should remain active (2 to 3 walks a day) and eat a balanced diet with plenty of fluids. If you have diarrhea that does not go away after a few days, please see your family doctor.



Pills for pain control (such as Tylenol #3®) may cause constipation. Your doctor may prescribe a gentle laxative for you (such as Colace®). Please do not administer rectal suppositories or Fleet® enemas without your doctor's direction.

## **Medications at home**

Once you go home, you will take your usual medications. Your doctor will tell you if there are any changes.

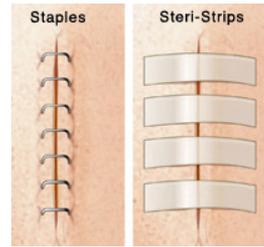
If you are given added medications, such as antibiotics, please take them as directed until they are gone. Please do not stop your antibiotics because you are feeling well.



It is normal to feel some pain for days to weeks after major surgery. Your surgeon will prescribe pain medications for you upon discharge. If you find they do not ease your pain, please contact your family doctor.

## Care of your incision at home

Your incision line will not be fully healed when you go home. You may leave the hospital with staples in your incision line. Your surgeon will tell you when you need to have the staples removed.



Once the staples are removed, strips of tape (called steri-strips) will be applied to support your incision line. Please do not remove them but let them peel off on their own. You may trim the edges with clean scissors as they peel off. The steri-strips will stay on for 5 to 7 days.

If your incision is not leaking, you may leave it uncovered. If there is any leakage (this fluid should be watery, light coloured), you may have to place a small strip dressing over your incision line. If the fluid from your incision changes, becomes thick, mucky and/or has an unusual smell, please see your doctor without delay.

If your surgeon feels that you will need nursing care for your incision, wound or ostomy, this will be set up prior to leaving the hospital. Once home, you will be called by the nurse to arrange your care.

You may shower at home, but do not soak in a bathtub, hot tub or pool until told that you may do so. When showering, do not have the shower spray directly on your incision. Gently wash the area and pat dry with a clean towel.

Take care to protect your incision line. If you need to cough or sneeze, please hug yourself or place a pillow over your incision to protect the area. As well, please do not lift any more than 10 to 15 lbs or take part in demanding activity for 4 to 6 weeks after your surgery. This includes household chores such as vacuuming, carrying groceries or outdoor activities like yard work (raking, mowing lawns, etc.). Remember to keep active with light activities such as walking.

## Return to Work and Driving

Please discuss with your surgeon when you may return to work or drive as this will vary for each person. Your return to work will depend on the type of surgery you had, your personal recovery and the type of work that you do.

If you are taking any type of pain pills, do not drive as they may affect your coordination, focus and reaction times.



Please keep yourself (and others) safe on the roads. Your incision does not prevent you from wearing your seatbelt. It must be used at all times in your vehicle. If the seatbelt feels uncomfortable, try using a small pillow or pad for comfort.

## Please seek medical attention if...

- your incision line begins to open up
- your incision line looks infected (it may be red, warm, swollen, painful, unusual smell, and/or leaking mucky fluid)
- you have a persistent low-grade fever (greater than or equal to 38° C)
- you have a fever spike (greater than or equal to 39° C) with or without shakes and body chills
- you have nausea and vomiting and cannot eat or drink
- you feel suddenly short of breath
- your calves (lower portion of legs) become swollen and painful
- you have increasing pain that is not eased with the medications prescribed
- you have ongoing diarrhea
- for **Urology Surgery**:
  - your urinary stoma stops draining urine for greater than 3 hours
  - you are unable to void or insert catheter in the setting of a neobladder
- for **Gynecology Surgery**:
  - Vaginal bleeding that soaks more than one sanitary pad per hour
  - Foul-smelling discharge from vagina
  - Trouble urinating and burning when you urinate

