Standard 2
Partnering with Consumers
Consumers and/or carers provided feedback on this patient information.

Standard 6
Clinical Handover
The use of a standard process for clinical handover has been shown to improve the safety of patient care because critical information is more likely to be transferred and acted upon.

Standard 11
Service Delivery
Patients and the community have access to safe, high quality healthcare services that are appropriate, effective and meet their needs.

Standard 12
Provision of Care
The intention of this standard is to ensure high quality care is delivered to consumers/patients throughout the care continuum.
Be strong and healthy in the lead up to your surgery

Exercise before surgery
To physically prepare for your surgery:
• aim for 30 minutes of daily gentle exercise e.g. walking
• if you have other health problems restricting exercise, aim to discuss this with a health professional, such as your GP
• if you smoke, try to stop, or reduce the number of cigarettes smoked
• practise deep breathing exercises.

Improving your nutrition
To stay healthy in the lead-up to your surgery:
• eat at least three meal per day, do not skip meals
• include two or three snacks if your appetite is poor or you need to gain weight
• choose a variety of foods from the five food groups: meat, dairy, bread and cereals, fruits and vegetables

Nutrition is important
Eating and drinking well in the lead up to surgery is very important as it assists recovery and reduces the risk of complications. Unless directed by a dietitian, it is important not to lose weight in the weeks prior to your surgery. If you have lost weight recently without trying, aim to maintain your weight or even increase it prior to surgery, if possible.
How can I maintain a healthy weight?

If you are underweight, or if you have had recent weight loss:

• include two or three between-meal snacks per day, on top of your three main meals
• choose high-energy, high-protein foods as a priority for your meals and snacks, e.g. dairy milk drinks, cheese, yoghurt, custard, ice cream), egg, meat, poultry, fish, nuts and legumes
• increase your energy intake by adding high-kilojoule extras to your meals and snacks, e.g. butter, margarine, cheese, cream, avocado, peanut butter, honey and oil
• frequently sip nourishing fluids such as milk drinks and juices. Avoid fluids that provide little nutrition such as tea, coffee and softdrinks
• if required, drink commercial nutritional supplement drinks such as Sustagen or Ensure, after consulting your dietitian.

Will I need to see a dietitian?

Not all surgical patients need the intervention of a dietitian. Please talk to the nurse/anaesthetist at your pre-anaesthetic appointment if you have concerns.
Before surgery

Leading up to your operation, you will need to:
• be strong in mind and body
• be seen in our pre-anaesthetic clinic
• stop smoking (if you need assistance to quit, we can help)
• stop drinking alcohol
• walk gently for up to 30 minutes a day
• discuss your surgery with family and friends
• drink your pre-operation drinks as instructed.

What to bring with you to Hospital:
• your valid Medicare card
• your current medications or a list of these medications
• toiletries
• comfortable day clothes and footwear
• any recent x-rays, tests or scans
• your ‘ERAS Daily recovery goals’ checklist
• any walking aid that you usually require
• any reading or other prescription glasses.

You are encouraged to bring your own water bottle to help keep track of your water intake.
Eating and drinking before your surgery

PreOp drinks

PreOp drinks are nutritional drinks containing carbohydrates and electrolytes that prepares your body for surgery and assist with your recovery.

Handy hint: try drinking your PreOp cold from the fridge or over ice. If you find the drink too sweet, try mixing with water or soda water.

For morning surgery

Day before surgery:
- drink four PreOp drinks (two after lunch and two after dinner).

Day of surgery:
- drink two PreOp drinks in the morning (before 6.00am)
- fast from fluids from 6.00am or as instructed by your pre-anaesthetic appointment.
For afternoon surgery

Day before surgery:
• drink four PreOp drinks (two after lunch and two after dinner).

Day of surgery:
• drink two PreOp drinks in the morning (before 11.00am)
• fast from fluids from 11.00am or as instructed by your pre-anaesthetic appointment.

You will need to stop eating solid foods six hours prior to your anaesthetic and stop drinking clear fluids two hours prior to your anaesthetic. If you are to have bowel preparation before your surgery, you will be given instructions on this at your appointment.
After your surgery

Powering your recovery through physiotherapy

- Take a slow deep breath
- Hold for 3-5 seconds, gently breathe out
- Repeat five times
- Finish with a good, strong cough

What are my deep breathing exercises?

Deep breathing exercises should be done every hour to avoid chest infections and other complications, as shown above. It is important you have adequate pain relief to enable you to take slow, deep breaths and a good, strong cough.

Handy hint: to ease pain in your wound, place a pillow or towel over your wound for support when coughing.

Will I see a physiotherapist?

Not all surgical patients need physiotherapy intervention – it depends on the type of surgery, your age, pre-existing respiratory function or your level of mobility.

What can I do to prevent complications after surgery?

Recommended post-operative routine for all surgical patients is:
Surgery day

Sit out of bed for two hours in the afternoon/evening following surgery, with the assistance of nursing staff. Complete deep breathing exercises.

Day 1

Sit out of bed for four to six hours. Walk for 50 metres with a nurse or physiotherapist. Complete deep breathing and coughing exercises.

Day 2

Sit out of bed for six hours. Walk for 50 metres two to three times during the day. Complete deep breathing and coughing exercises.

Day 3+

Sit out of bed for six hours. Walk for 50 metres three to five times during the day. Increase walking distance each day.
After surgery

Eating and drinking
• you will probably be able to drink other fluids from two hours after your surgery
• your nurse will bring you a nutritional supplement drink
• you will probably be able to eat from four hours after your surgery; your nurse will bring you your meal.

Moving around and mobilising
• it is important to breathe deeply and cough after you wake up; your nurse and physiotherapist will encourage you to do this
• you will sit out of bed, for one to two hours, the evening after your operation; your nurse or physiotherapist will help you to a comfortable chair in your room.

Medication
• you will be given regular analgesia (pain relief) and anti-nausea medication after your operation.
Your ERAS daily recovery goals

On day 1, the day after your operation:
• get up for a shower, with help
• sit in a chair, out of bed, for four to six hours
• walk more than 50 metres, with help.
• eat and tolerate a high-energy, high-protein diet
• tell staff if you need help at home or have any questions.

On day 2:
• get up for a shower, with or without help
• sit out of bed, for most of the day
• walk more than 50 metres, with or without help
• eat and tolerate a high-energy, high-protein diet.

On day 3:
• get up for a shower, with or without help
• sit in a chair for most of the day
• walk more than 50 metres, with or without help
• eat and tolerate a high-energy, high-protein diet
• discuss your discharge plans with nurses.

From day 4, onward:
• walk and shower without assistance
• tolerate all diet and fluids
• consider being discharged from hospital.
Before you go home

You will be ready to go home once:
• you can eat and drink normally
• your pain is under control
• you are able to sit out of bed and walk by yourself
• you have had either a bowel motion or passed wind.

An outpatient appointment will be made on discharge.

At home:
• continue gentle exercise, such as walking
• do not lift heavy objects or strain yourself for six weeks
• understand that you may feel tired and have less energy than usual
• your bowels may be irregular and uncomfortable for a while, but this will settle down.

Warning signs to look out for:
• feeling hot and feverish
• wound redness or discharge from wound
• vomiting
• breathlessness
• increasing, consistent abdominal pain
• chest or leg pain.

If you experience any of the above symptoms, at any time, please call: 5370 3976 (Monday to Friday) and inform the ERAS Nurse Coordinator that you are on the ERAS program. Or phone Nambour General Hospital weekends and after hours on 5470 6670.