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WHAT TO EXPECT AFTER YOUR LAPAROSCOPIC COLON **SURGERY**

Day of Surgery, (Post-op Day #0)

- You will be somewhat sedated. You may also feel nausea and some pain. But let your nurse know so that we can make you comfortable.
- The nurse will help you out of the bed into a chair.
- You may have a few sips of water or ice chips if your mouth feels dry.
- You will have a couple of IV's through which you will be receiving fluids and medicines.
- You will have a catheter draining urine from your bladder. This is placed purely for your comfort and will be removed soon.
- You will be wearing leg stockings to prevent clots.
- When in bed perform deep breathing exercises and move your limbs and joints to keep your self occupied.
- You will either have an epidural catheter in the back for pain control or an IV Morphine drip. This is Patient Controlled Anesthesia and you can give yourself a shot of pain medicine whenever you need it.
- If your pain is not controlled inform your nurse. Some degree of pain is expected after surgery but you must not suffer with pain. A reasonable level of pain is 1-2 on a painscale of 1-10. Excessive pain after surgery may cause many complications and must be avoided.

Post-op Day #1

- You will be oriented to the unit and hospital.
- You will be assisted by our staff to get out of the bed and walk in the corridor. The idea is to keep you as active as possible.
- When in bed, move your limbs and perform Incentive Spirometry (breathing exercises).
- You may have small portions of clear liquid diet as long as it does not make you nauseous. We also encourage you to have some chewing gum.
- Your dressing will be removed and the incision may be left exposed.
- Your urine catheter will be removed.
- The Discharge planner will see you today and evaluate your home situation to see if you need any kind of assistance at home. They will also determine if you need a front wheel walker or a bedside commode at home

Post-op Day #2

- Once again you will be encouraged to walk and sit in a chair. The less time you spend in the bed, the better.
- When in bed, elevate the head end of the bed at 45 degrees and exercise your limbs as much as possible.
- You wont have much of an appetite. You will be given Impact, Ensure or Glucerna.
- From now on the pain will be controlled with oral medications. You must call the nurse if you have pain. Some degree of pain is expected after surgery but you must not suffer with pain. A reasonable level of pain is 1-2 on a pain-scale of 1-10.
- Many people experience difficulty with sleeping in the hospital because of unfamiliar environment. You may ask for a sleeping pill if you are having problems with sleeping.

Post-op, Day #3

- You will be asked to be more active from now on. You will be required to walk at least 4 times a day.
- You will be given low fat low fiber diet if you do not have nausea or vomiting. Only consume small amounts.
- The dietician will educate you about a low fat and low fiber diet. You need to take this restricted diet for the next 2 weeks only. After this period there will be no dietary restrictions.
- The Physical therapist and the Discharge planner will continue to see you. If you have any questions or concerns about going home bring it to their attention.
- If all goes well you can expect discharge today.
- The nurse will give you the "Discharge Instruction Sheet". This will explain what to expect after discharge.
- You will also get the discharge prescriptions. Have a relative go to the pharmacy and pick up your prescription so that it is available when you go home.
- You will be advised to gradually increase activity when you go home.
- Continue breathing exercises when you get home. Also keep wearing your stockings for the next 2 weeks when you go home
- When you go home you may feel tired, weak and under the weather. You may have some pain, nausea, constipation, bloating or diarrhea. This is part and parcel of recovery and it takes almost 2 weeks before you feel better. Full recovery takes as long as 4-6 weeks. Call us if you have severe pain, fever more than 101 or severe diarrhea or constipation.

The above is a general description of the expected course of your stay in hospital. However every patient is different and we may have to tailor the postoperative care according to your individual needs. If there are any postoperative problems you may require a much longer hospital stay.