Colorectal Surgery
Enhanced Recovery After Surgery (ERAS)
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Your Colorectal Surgical Team

**Surgeon:**
Part of your team who will perform the surgery and monitor your care after surgery.

**Resident Physician:**
A doctor who will work closely with your surgical team, a surgical resident is a medical doctor who is in training to become a surgeon.

**Nurse Practitioners/Physicians Assistants:**
Part of your team who work closely with and assist your doctors and surgeons, they can answer any questions you may have.

**Wound & Ostomy Care Nurse (WOCN):**
A registered nurse who is certified in wound and ostomy care. A WOCN nurse may be part of your team to assist and instruct you on ostomy care, should you require an ostomy.

**Discharge Planner:**
A nurse who will help set up your discharge home. They assist with setting up any home care or supplies you should need upon discharge.

**Anesthesiologist/Nurse Anesthetists:**
A doctor or nurse who is part of your surgical team to give you your anesthesia and manage pain during the procedure.

**Registered Nurse (RN):**
A Registered Nurse will be part of your surgical team from before your surgery until your discharge home. They are responsible for assessments, medication administration and education.

**Physical Therapist:**
Part of your team who will assist in your recovery and increase your mobility after surgery.

**Nutritionist:**
You may be visited by a nutritionist after your surgery that will answer questions and instruct you on any dietary changes you may have.
Your Digestive System

What is Colorectal Surgery?

A colorectal surgeon has undergone special training to perform surgery on the intestines and rectum. Colorectal surgeries are performed to repair and take out certain sections of the intestine or rectum.

Your surgery may be done “laparoscopically” with small incisions or “open” with a larger incision. Your surgeon may also use a “robot” as part of your procedure.
What is Enhanced Recovery After Surgery?

Enhanced Recovery After Surgery (ERAS) was developed by a group of surgeons to improve outcomes of patients undergoing colorectal surgery. The program is based on evidence from years of research into how patients can recover quickly from surgery and resume their usual activities (erassociety.org).

**Principles of ERAS:**

- As a patient, you will receive information and counselling about your surgery. It is important to be informed about the surgery and feel prepared.

- Your team of doctors and nurses will have a plan to keep pain and discomfort at a tolerable level after surgery.

- It is important to be mobile after surgery. Getting out of bed and walking after surgery will help your recovery.

- Nutrition is key to healing. As part of your recovery, your medical team will encourage you to eat and drink soon after surgery.
How Do I Prepare For Surgery?

- It is important to follow a healthy diet and drink plenty of fluids in the days before surgery.

- Initiating an exercise program in the weeks prior to surgery will make your recovery from surgery easier. It is important to incorporate exercise into your daily routine, even taking walks can help.

- Using nicotine products increases the risk of complications after surgery. It is important to stop the use of nicotine products in the weeks prior to surgery to optimize wound healing and help with breathing.

- It is recommended not to drink alcoholic beverages before surgery. This will help you heal after surgery. Please let us know if you need help reducing your alcohol use before surgery.

- When you are discharged from the hospital you will need help with daily tasks. You should plan for this prior to surgery. If possible, ask family or friends to help with meals and cleaning.

- It is important to stop taking Non-Steroidal Anti-Inflammatory medications (NSAIDS) the week before surgery. Talk with your surgeon if you have concerns about this. Common NSAIDS include:
  - ✔ Aspirin (brand names include Bayer, Bufferin, and Ecotrin, St. Joseph)
  - ✔ Ibuprofen (Advil, Motrin)
  - ✔ Naproxen (Aleve, Anaprox DS, Naprosyn)
  - ✔ Celecoxib (Celebrex)
Things to Do: Week(s) Before Surgery

- Prior to surgery, you will have an appointment at Pre-Admission testing on the first floor of Millard Fillmore Suburban Hospital. At this appointment you will have testing done, review your surgery instructions and health history. At your Pre-Admission testing appointment you will also review medications you are taking. You will get a special drink and special showering instructions for the day before surgery. **Please bring a list of all of your current medications.**

**DATE OF MY PRE-ADMISSION APPOINTMENT:** ________________________________

- **Attend Pre-operative class.** It is important to attend a pre-surgery class to become fully informed about your surgery. A nurse will teach the class and answer any questions you may have prior to your surgery.

**DATE OF MY PRE-SURGERY CLASS:** ______________________________________

- **Special Drink:** The morning of your surgery you will drink a carbohydrate drink which will help your body maintain a healthy blood sugar and muscle strength during surgery.

- You will need to do two (2) pre-operative showers with a special soap called chlorhexidine gluconate (CHG). The soap comes in a liquid form and two (2) 4 ounce bottles are included in the kit you received during your preadmission testing visit. You will use one small bottle for each shower.

**Bathing Instructions**

- You will take two showers with CHG shower soap. The first shower should be taken the night before surgery and the second shower the morning of surgery.

- You should, if possible, remove any body piercings before your first shower and leave your jewelry off until after your surgery.

- With each shower, if you are going to wash your hair, wash as usual with your normal shampoo. Rinse your hair and body afterward.

- Wash your face and genital area with regular bath soap before starting with the CHG special soap. Do NOT use the CHG special soap in these areas.
• Do not shave any area of your body including the area of your body where your surgery will be performed. Any new cut, abrasion or rash will need to be evaluated and may cause a delay in your procedure.

• Turn water off before applying the CHG shower soap to prevent rinsing it off too soon. Apply the soap to your entire body from the jaw down, using a clean washcloth or your hands, adding more soap as you need it, and using the whole bottle. Do not use CHG shower soap near your eyes, ears, nose or mouth. Wash thoroughly for three minutes, paying special attention to the area where your surgery will be performed. Do not scrub your skin too hard, and make sure to lather the soap into all skin folds, such as your armpits, under breasts, abdomen and groin. Do not wash with your regular soap after using the CHG shower soap. Stay lathered up for one full minute before you turn the water back on and rinse your body well.

• Pat yourself dry with a fresh, clean, soft towel after each shower. Put on clean clothes or pajamas. Use freshly laundered bed linens for the first night.

• Do not apply any lotions, perfumes or powders after use. You may use deodorant.

Pre-Surgery Clear Nutrition Drink

• You will receive 3 bottles of a special nutrition drink that contains carbohydrates and antioxidants. This drink will help your body prepare for and recover from surgery.

• The Ensure Pre-Surgery drink is 10 ounces, with 50 grams of carbohydrates. It has a very mild lightly sweet flavor. You can drink it at room temperature or chilled.

• You can add the calorie free flavoring we provided in your bag if you want a different flavor. To start, add ½ a crystal light packet for each bottle. If you want a stronger flavor, you can add more.

• Night Before Surgery
  ✔ Drink 2 bottles.

• Day of Surgery Drink
  ✔ Drink 1 bottle 2 hours before your surgery. Try to finish the drink in 10 minutes.
Things to Do: Day Before Your Surgery

• **Pack a Bag.** Be sure to include:
  ✔ Photo ID.
  ✔ Medical and prescription insurance cards.
  ✔ Chewing gum. Your medical team will encourage you to chew gum a few times a day. Gum chewing will help your bowel function to return after surgery. Only chew gum after surgery.
  ✔ Clean clothes and underwear.
  ✔ Glasses, contacts, denture supplies, hearing aides.
  ✔ Healthcare proxy, living will or other Advanced Directives (please ask staff if assistance is needed regarding these forms).
  ✔ Personal Hygiene products, toothbrush, toothpaste, deodorant, mouthwash, lotion, shaving cream, razor, body wash, brush/comb.

• **What NOT to bring to the Hospital:**
  ✔ Valuables, such as credit cards, wallets, money, jewelry.
  ✔ Personal medications (unless specifically advised to do so).
  ✔ Electrical equipment like: fans, hair dryers, curling or flat iron.

• **Take a shower with CHG shower soap (1 of 2).**

• **Follow your surgeon’s instructions for pre-operative bowel prep.**

• **Drink Pre-Surgery Clear Nutritional Drink (2 bottles).**
  ✔ This drink will help your body prepare for and recover from surgery.

• **No Eating SOLID food after midnight OR earlier depending on your surgeon’s instructions.**
  ✔ You may have clear liquids such as broth, tea and gelatin.
  ✔ Do not drink anything with red or purple coloring.

• **Brush your teeth.**
Things to Do: Day of Your Surgery

- Take a shower with the CHG shower soap (2 of 2).
- Brush your teeth.
- Do not eat solid foods the day of surgery. Clear liquids are okay to consume up to two hours before your surgery. Examples of clear liquids are; water, black coffee, clear tea, and broth.
- Drink Pre-Surgery Clear Nutrition Drink.
  - Drink one bottle of the pre-surgery clear nutrition drink 2 hours before your surgery. You should drink the full bottle within 10 minutes. This drink will help make you less thirsty, control your blood sugar, and maintain your muscle strength during the operation.
- Arrive at the hospital and check in at the Admissions desk, in the main lobby. You will change into a hospital gown, all clothes and personal items will be put into a labelled bag for family to take.
- You will need to remove all jewelry (including body piercings), makeup, contact lenses and nail polish.
- The nursing staff will review your final preparations before surgery. When you are ready for surgery you will be transported to the operating room holding.
- During surgery your family/friends will stay in the surgical waiting area.
- In the operating holding area you will be introduced to your surgical team.
- An intravenous (IV) will be started. Your IV line is a tube inserted into your vein so we can give you fluids, medications, antibiotics, and blood transfusions if needed.
- Special white support stockings will be put on your legs. They support and promote blood circulation in your legs during and after surgery.
- The anesthesiologist will discuss the anesthesia method appropriate for you.
- A warming blanket will be placed over you to keep your body warm.

Questions or Concerns to Discuss with the Surgical Team:

_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________
Your Hospital Stay (on average 3-4 days)

After Surgery:
You will need careful monitoring while you recover from anesthesia and slowly awaken. You will be moved directly from the operating room to recovery room, which we call PACU, while your anesthesia wears off.

What should I expect while I am in the hospital?
• Your doctor will order for your blood sugar to be checked every 6 hours for the first day after surgery. This is done for all post-surgical patients, even if you have no history of Diabetes.

• Call...Do Not Fall!
You may be at risk for falling due to anesthesia and/or pain medication. Call for assistance when getting out of bed if needed.

• Blood Tests may be ordered by your provider to see how your body is handling your surgery. You may need to have blood drawn more than once during your hospital stay.

• A Foley catheter may be used to drain your urine. This will be removed shortly after surgery and you will urinate on your own.

• Deep Breathing is important to do the following exercises to prevent the accumulation of congestion in your lungs:

1. Incentive Spirometer (breathing exercise device made up of a clear cylinder with a ball inside it and a flexible tube with a mouthpiece for you to blow into):

   ✔ Hold the cylinder in an upright position so the ball is at the bottom.
   ✔ Exhale normally, and then place your lips tightly around the mouthpiece.
   ✔ Inhale slowly to raise the ball in the chamber to the top.
   ✔ Remove lips from the mouthpiece, hold for 3-5 seconds and exhale.
   ✔ Repeat the exercise 10 times, every hour.
2. **Diaphragmatic breathing**

✔ Place a hand on either side of your lower rib cage and slowly take a deep breath in through your nose. You should feel your ribs pushing into your hands. Hold the breath for 3-5 seconds and then exhale through your mouth.

3. **Coughing**, an important method for clearing your lungs. Take a deep breath in and cough from your abdomen as you breathe out.

If any of these exercises cause discomfort, try hugging a pillow against your abdomen to lessen pain.

- Your medical team may order a blood thinner medication to reduce the risk of getting a blood clot after surgery.

**When can I eat and drink while in the hospital?**

- Post op clear liquids will be started – no carbonation or straws; clear liquids will transition to solid diet as you are able to tolerate.
- Chewing gum can help your stomach and bowels work after surgery.
- Medications for nausea are available if needed let your nurse know.
How will my pain be managed?

• At Kaleida Health, pain is evaluated on a numeric scale. While everyone experiences pain differently, the descriptions below will help you tell where your level of pain is on the scale so your nurse can help you.

• You will be asked to rate your pain, using the scale below. You may also be asked if the pain is acute (new) or chronic (old and familiar).

0 = no pain, 10 = worst pain. 0-4 is generally considered the reasonable range for post-operative pain.

Remind you are having surgery, so some level of pain is expected.

In addition to taking pain medication, you can decrease pain by using relaxation techniques such as: listening to music, watching TV, meditating, visiting with family or friends. It is important to tell your nurse if your pain is not well managed.

When will I begin walking?

The aim for patients is to get out of bed, starting the day of surgery. Your nurse will encourage you to be out of bed for meals and throughout the day.

Activity Goals:

• The day of surgery you will be expected to get out of bed.

• Post-op day 1 your out of bed goal will be 180 minutes or 3 hours.

• Post-op day 2 your out of bed goal will be 240 minutes or 4 hours.

• Post-op day 3 your out of bed goal will be 360 minutes or 6 hours.
Going Home

**Constipation:** Be aware that decreased activity and pain medicine can cause constipation. Ask your surgical team about appropriate use of over-the-counter laxatives or stool softeners to help you resume your normal bowel routine if constipation is a problem. Increasing fluids and activity can help prevent constipation.

**Wound Care:** Keep your incision clean and dry. No soaking in bathtubs, hot tubs or swimming pools until the incision is healed and it is approved by your doctor.

**Medications:** Your nurse will review your discharge medication list with you prior to discharge.

**Pain:** It is common to experience discomfort after surgery. Take your pain medication as needed. Pain will resolve with time as you heal. In addition to taking pain medication, you can decrease pain by using relaxation techniques such as: listening to music, watching TV, meditating, or spending time with family or friends.

**Activity:** It is important to stay active after surgery. You can increase your activity each day. Your providers will instruct you on any limitations you have prior to leaving the hospital – follow these instructions. Also, remember not to drive if you have taken any pain medication.
When to Call Your Provider When You Get Home

- Oral temperature of 101°F or higher.
- Redness or drainage from the incision.
- Increased pain unrelieved by pain medications.
- Nausea and/or vomiting.
- If you experience chest pain or shortness of breath, seek immediate medical attention.
How to Contact Us

If you have questions about your upcoming surgery, please do not hesitate to call us. You may call your doctor’s office if you have questions for your surgeon.

Millard Fillmore Suburban Hospital
1540 Maple Road
Williamsville, NY 14221
(716) 568-3600
Kaleida Health does not discriminate on the basis of race, color, religion, sex, national origin, disability, sexual orientation, gender identity or expression, physical appearance, source of payment, or age.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Please ask your care team.

Spanish
ATENCIÓN: Si habla español, los servicios de asistencia lingüística están disponibles, de forma gratuita, para usted. Por favor, pregunte a su equipo de atención.

Arabic/Sudanese
تنبيه: إذا كنت تتحدث العربية، فسوف تتوفر لك خدمات مساعدة لغوية مجانًا. يرجى أن تسأل فريق العناية الخاص بك.