

Colorectal Surgery Guide



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Guide to colorectal surgery

Type of surgery you are having:

Surgeon's name:

Surgery date: _____

Time: _____ AM/PM: _____

Arrive at this time: _____ AM/PM: _____

Where to go on surgery day:

Follow-up visit date: _____ AM/PM: _____

For questions, call: _____

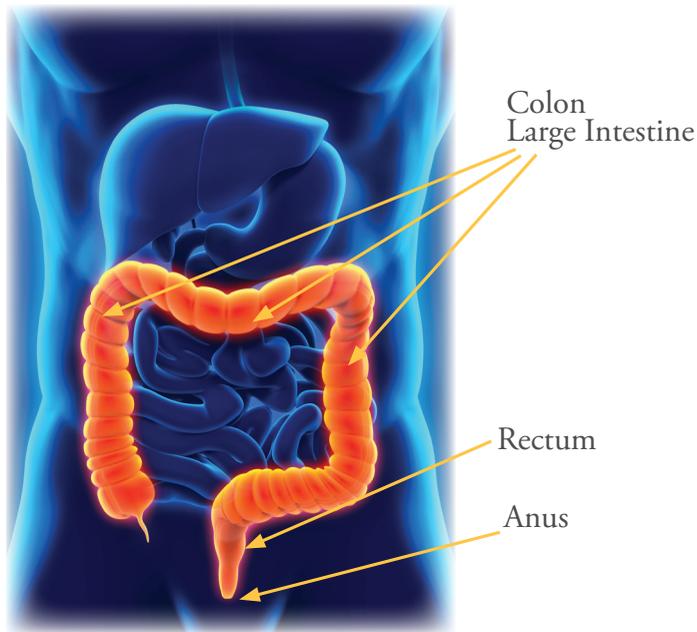
at phone number: (_____) _____ - _____.

- Read through this book before your surgery. It will help you understand what to expect.
- Use the checklists to guide you as you get ready.
- Bring this book with you to all appointments and to the hospital on surgery day.

About the colon

What does the colon do?

After you eat, food goes from your stomach to your small intestine. Your small intestine absorbs nutrients and makes stool. The stool passes to your large intestine, which is also called the colon. Your colon stores the stool until you have a bowel movement.



Why colon surgery?

Sometimes your colon does not work properly because of disease, inflammation or cancer. It may be necessary to remove the part of the colon that is not working. Your healthcare team will explain more about why you need colon surgery.

Will I need an ostomy?

Some people who have colon surgery may need an ostomy, also called a bag. An ostomy is an opening from the colon (colostomy) or small intestine (ileostomy) through the skin.

The opening is called a stoma. Stool passes through the stoma into an attached plastic pouch. If you need an ostomy, a nurse will help you understand how the ostomy works and how to care for it. An ostomy may be temporary (needed for a short time) or it may be permanent (for the rest of a person's life). Talk to your healthcare team about whether or not you will need an ostomy.

Starting today

- 
- Eat healthy foods, including fruits, vegetables, low-fat dairy products and protein like lean meat, chicken and fish before surgery. This will help you heal after surgery.
 - Drink nutritional shakes like Ensure®, Glucerna® or Boost® to help you get all the nutrients you need.
 - Talk to your healthcare team or a dietitian if you have questions.
 - Drink 6 to 8 glasses of fluids, especially water, every day before surgery so you are hydrated.
 - Be active for at least 15 to 20 minutes each day until surgery. This will make getting up and moving around after surgery easier for you.
 - Begin walking or choose another activity you enjoy.
 - Continue your regular activity plan if you already have one.
 - Plan ahead to make coming home after surgery easier.
 - Ask a family member or friend to be your support person. This person will come with you to appointments and the hospital. They will drive you home after surgery.
 - My support person is:
 - _____
 - Ask for help with meals and housework after surgery.
 - Know your target blood sugar level if you have diabetes. High blood sugar can slow healing and raise the chance of infection.
 - Work with your healthcare team to get blood sugar well controlled.
 - Limit alcohol like beer, wine and liquor to 2 drinks a day.
 - Do not drink any alcohol for 24 hours (1 day) before surgery – alcohol can affect how medicine works.
 - Talk to your healthcare team if you need help cutting back or stopping.
 - Stop smoking – smoking slows healing, can raise the chance of infection, and causes breathing problems after surgery.
 - Go to YesQuit.org or call 877.937.7848
 - Stop recreational drug use. Recreational drugs, including marijuana, slow healing and affect pain management.
 - Talk to your healthcare team for help.

Before surgery

- Use the Medicine List on page 7 to write down all medicines, supplements, vitamins and herbs you take with the dose and how often you take each one.
 - Bring this with you to all appointments and to the hospital. Do NOT bring medicine bottles with you to the hospital.
 - If you have diabetes, ask about changes for diabetes medicine and insulin.
- Buy 2 to 3 packs of your favorite gum.
 - If you cannot chew gum, buy hard candy.
 - If you have diabetes, buy sugar-free gum or hard candy.
 - Chewing gum or sucking on hard candy after surgery will help your colon start working properly.
- Gather things you will need in the hospital.
 - This book
 - Medicine List in this book
 - Glasses, hearing aids, dentures
 - CPAP
 - Picture ID and insurance cards
 - Comfortable clothes and slippers
 - Toiletries like toothbrush, toothpaste and deodorant
 - Gum
- Visit the website below for information and videos about having surgery at Baylor Scott & White Health hospitals.

[BSWHealth.com/SurgeryGuide](https://www.bswhealth.com/SurgeryGuide)

My Medicine List

List your medicines, supplements, vitamins, and herbs with the dose and how often you take each one. Example:

Name of Medicine	Dose	I Take
Furosemide	40 mg	1 tablet every morning
Metamucil	1 teaspoon	every morning & night

My Medicine:

Name of Medicine	Dose	I Take

Your healthcare team will tell you which medicines, supplements, vitamins and herbs you should stop taking before surgery. Write those down here.

Stop These	On This Date

Questions and notes about medicines.

The day before surgery

- Drink only clear liquids starting at breakfast. Clear liquids are liquids you can see through.
 - Do NOT eat any food.
 - Drink at least 6 to 8 glasses of clear liquids during the day.
 - Clear liquids you can have are:
 - Water
 - Clear juice like apple juice (not red or purple)
 - Coffee and tea without milk or cream
 - Broth
 - Popsicles without fruits or milk (not red or purple)
 - Sports drinks like Gatorade® and Powerade® (not red or purple)
 - Jell-O® (not red or purple)
 - You can drink some of these liquids up until 2 hours before your surgery – page 9 will tell you which ones
 - If you have diabetes, drink sugar-free clear liquids
- Take your antibiotics by following the instructions on the medicine bottle
- Follow the instructions for the bowel prep if you were told to do a bowel prep. This cleans out your colon for surgery and lowers the chance of infection after surgery
 - Include the bowel prep drinks in your clear liquids during the day
- Take a shower using chlorhexidine gluconate (CHG or Hibiclens®) liquid soap before bed.
 - Do NOT use this soap if you are allergic to chlorhexidine gluconate.
 - Use a clean washcloth.
 - Wash your body with half a cup of the soap. Let it sit on your skin for 3 to 5 minutes before rinsing it off.
 - Do NOT wash your face or genital area with chlorhexidine gluconate. Wash these areas with regular soap and then wash the rest of your body with chlorhexidine gluconate.
 - Do NOT shave any part of your body, including face and underarms.
 - Do NOT put on lotion, make-up, perfume or cologne after showering
 - Dry off with a clean towel.
 - Put on clean clothes.
 - Go to bed on clean sheets right after showering.
 - Do NOT allow pets on your bed.



Surgery day

Important information about eating and drinking the day of your surgery

Do NOT eat any food or drink other than the clear liquids listed below on the day of surgery. Clear liquids are liquids you can see through. You CAN drink clear liquids up to 2 hours before your surgery time. The last thing you drink should be your special pre-surgery drink – finish it 2 hours before your surgery time. Drinking clear liquids and the special pre-surgery drink will keep you from getting dehydrated and will make it easier for you to get better after surgery. The special pre-surgery drink has the right type and amount of energy your body needs during and after surgery. It is safe and good for you to drink until up to 2 hours before surgery.

- Drink only clear liquids listed below:
 - Water
 - Sports drinks like Gatorade® and Powerade® (not red or purple)
 - Special pre-surgery drink
 - Clear juice like apple juice (not red or purple)
 - Coffee and tea without milk or cream
 - Popsicles without fruits or milk (not red or purple)
 - If you have diabetes, drink sugar-free clear liquids
 - Do NOT eat anything
 - Do NOT chew gum or have any candy
- Drink the special pre-surgery drink last.
 - Stop drinking all liquids 2 hours before surgery time
 - Take medicine your healthcare team told you to take
- Finish this drink 2 hours before your surgery
- Take another shower using chlorhexidine gluconate (CHG or Hibiclens®) liquid soap.
 - Do NOT use this soap if you are allergic to chlorhexidine gluconate.
 - Use a clean washcloth.
 - Wash your body with half a cup of the soap.
 - Let it sit on your skin for 3 to 5 minutes before rinsing it off.
 - Do NOT wash your face or genital area with chlorhexidine gluconate – wash these areas with regular soap before using the chlorhexidine gluconate.
 - Do NOT shave any part of your body, including face and underarms.
 - Do NOT put on deodorant, lotion, make-up, perfume or cologne after showering.
 - Dry off with a clean towel.
 - Put on clean, loose-fitting clothes.

- Bring these items with you to the hospital:
 - This book
 - Medicine List in this book
 - Glasses, hearing aids, dentures
 - CPAP
 - Picture ID and insurance cards
 - Comfortable clothes and slippers
 - Toiletries like toothbrush, toothpaste and deodorant
 - Gum
- Leave all valuables and jewelry, including earrings and other piercings, at home.
- Arrive at the hospital at the time you were told by your healthcare team.

What can I expect at the hospital?

Before surgery

Hospital staff will help you get ready for surgery. You will change into a hospital gown and you might get an IV (intravenous) line put in. A healthcare team member may clip hair around the surgery area before you go to the operating room. Before surgery starts, your skin around the area will be cleaned with special wipes to lower the chance of infection.

After surgery

Pain management

Many people have pain or discomfort after surgery, but your pain will be managed. Nurses and team members will ask you to describe your pain. Together we will come up with a goal for your pain level and a plan to manage your pain so you can do the things you need and want to do. There are 2 types of pain medicine, opioids and non-opioids. There are also many other ways to manage pain. Talking with us about your pain will allow us to work together to manage your pain.

Activity

You will get up and walk with help on the day of your surgery. Please do not try to get up by yourself. Getting up and walking soon after surgery will help you heal and will make you feel better faster. It may be uncomfortable at first, but it will get easier each time you get up.

Getting out of bed 4 to 6 times during the day will help you feel better, help get your colon working and will lessen your pain. Sit up in a chair to eat all meals starting the day after your surgery. Sitting up also will make it easier to eat and digest food and drinks.



Eating and drinking

You will start drinking liquids on the day of surgery. The first day after surgery, you may be able to start eating some solid food.

Drink plenty of liquid to keep from getting dehydrated. Drink 8 to 10 glasses of water or sports drinks like Gatorade® every day. Carbonated drinks, like soda, are not recommended until you are eating and drinking normally.

Chewing gum

Chewing gum after surgery will help your colon start working again. You can start chewing gum a few hours after your surgery.

Breathing

You will get a small plastic device called an IS (incentive spirometer) to use after surgery. The IS shows you how deep your breaths are. Use it every hour you are awake to make sure you are breathing deeply enough to fill your lungs. Breathe into it 10 times an hour every hour while awake. It can be uncomfortable to cough after surgery, but it is important to get mucus out of your lungs. Coughing is the best way to do this. Hold a pillow against your surgery area when you need to cough to lower pain. Do not try to hold a cough in.

Blood clot prevention

A blood clot, also called a DVT (deep vein thrombosis), can happen after surgery. It can also happen when a person is not getting up and moving. There are 3 main ways to lower your chance of getting a DVT:

- Get up and move around as soon as possible
- Wear foot or calf pumps called SCDs (sequential compression devices) while lying in bed
- Take blood thinner medicine ordered for you

Getting ready to go home

Before you can go home, you must:

- Drink liquids without nausea or vomiting
- Manage pain and nausea with medicine you can take by mouth
- Walk safely in the halls
- Show signs your bowels are working
- Manage your ostomy if you have one
- Know when your follow-up visit is scheduled
- Have your pain medicine prescription, if one is needed

My Progress to Recovery

Day of Surgery

Activity	Goal	Progress
Managing Pain	Manage pain with medicine taken by mouth	Overall, my pain today was: _____
Walking	2 to 4 times	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Spending time out of bed	As much as able	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Drinking fluids	As much as able	<input type="checkbox"/>
Chewing gum	2 to 4 times for 15 minutes each time	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Using incentive spirometer	Do 10 breaths every hour awake	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Avoiding nausea and vomiting	No nausea No vomiting	<input type="checkbox"/> <input type="checkbox"/> Number of times I've had nausea or vomited today

Day AFTER Surgery (POD#1)

Activity	Goal	Progress
Managing pain	Manage pain with medicine taken by mouth	Overall, my pain today was: _____
Walking in the halls	4 to 6 times	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Spending time out of bed	4 to 6 hours	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Sitting up for meals	All meals	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Drinking fluids	6 to 8 glasses	<input type="checkbox"/>
Eating crackers or solid food	As able, if ordered	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Chewing gum	4 to 6 times for 15 minutes each time	<input type="checkbox"/>
Using incentive spirometer	Do 10 breaths every hour awake	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Passing gas or having a bowel movement	Pass gas or have a bowel movement	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Avoiding nausea and vomiting	No nausea No vomiting	<input type="checkbox"/> <input type="checkbox"/> Number of times I've had nausea or vomited today
Getting bladder catheter out if you have one	Out today	<input type="checkbox"/>
Learning about ostomy, if you have one	Start today	<input type="checkbox"/>

2 Days AFTER Surgery (POD#2)

Activity	Goal	Progress
Managing pain	Manage pain with medicine taken by mouth	Overall, my pain today was: _____
Walking in the halls	4 to 6 times	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Spending time out of bed	6 hours or more	<input type="checkbox"/>
Sitting up for meals	All meals	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Drinking fluids	6 to 8 glasses	<input type="checkbox"/>
Eating crackers or solid food	As able, if ordered	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Chewing gum	4 to 6 times for 15 minutes each time	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Using incentive spirometer	Do 10 breaths every hour awake	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Passing gas or having a bowel movement	Pass gas or have a bowel movement	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Avoiding nausea and vomiting	No nausea No vomiting	<input type="checkbox"/> <input type="checkbox"/> Number of times I've had nausea or vomited today
Learning about ostomy if you have one	Continue today	<input type="checkbox"/>

What can I expect when I go home?

Pain Management

It is normal to have some pain while you are healing. Follow the instructions given to you by your healthcare team for taking medicine. Some people go home taking over-the-counter medicine to manage pain, and some people go home with prescription medicine to manage pain. Your healthcare team will talk with you about what is best for you. There are other things you can do to manage pain like moving around, using an ice pack, deep breathing, and finding a distraction like music, TV and games. What works best is different for each person.



Caring for My Incision

Follow these instructions to care for your incision and lower the chance of infection.

- Wash the area gently with warm, soapy water every day in the shower.
- Pat the area dry with a clean towel.
- If your incision is draining, cover it with a dry gauze pad and medical tape or cover it with a band-aid.
- Once the incision is no longer draining, leave it uncovered.
- If you have strips of tape on the incision, leave the tape on until it falls off by itself.
- If you have staples at the incision, they will be removed at your follow-up visit 7 to 14 days after surgery.
- If you have clear surgical glue on your incision, it will fall off in 10 to 14 days.
- Do NOT:
 - Use hydrogen peroxide or alcohol on the incision.
 - Soak in a bath or get in a pool until at least 2 weeks after surgery.
 - Put ointments, creams or oils on the incision for 6 weeks.

Drinks

Drink at least 6 to 8 glasses of water every day to avoid becoming dehydrated.

Signs of dehydration are:

- Feeling overly tired
- Having a dry mouth
- Feeling dizzy
- Nausea
- Dark-colored urine (pee)
- Urinating less than normal

Drink water if you have any of these signs. If you are not getting better with drinking water, call your healthcare team.

Food

After surgery, eat healthy foods like cooked vegetables, low-fat dairy products, and protein like lean meat and chicken. At your follow-up visit, your healthcare team will discuss advancing your diet with you.

Chew your food well. If your stomach gets upset after eating, try eating bland, low-fat food like plain rice, boiled chicken, dry toast and yogurt.



Bowel movements

Your bowel movements may be more frequent, may be bloody for the first 3 days after surgery and may be more like liquid after surgery. Some people have the opposite problem and are constipated or have to strain to have a bowel movement. Talk to your healthcare team if this happens to find out what you can do to soften your stool.

Activity

Being active will help your body recover faster and will help lessen pain. The tips below will help you stay active at home:

- Increase what you do each day to get back to your regular activities
- Sit up for all meals
- Spend at least 6 to 8 hours out of bed during the day
- Walk for 15 minutes 4 to 6 times during the day
- Rest when you feel tired – your body is healing when you are resting
- Do NOT lift more than 10 pounds until your healthcare team says you can – this includes lifting children, groceries, a briefcase and a backpack
- Ask your healthcare team when you can start activities like jogging, cycling and weight lifting

Returning to work

Going back to work depends on the type of work you do. It is best to slowly return to activities you did before surgery. It is also best to slowly increase the hours you work instead of going back full-time right away. In general, you should be able to return to work in 2 to 3 weeks depending on the type of work you do and what type of surgery you had. If you do heavy lifting or manual labor, you should talk to your surgeon about when you are ready to go back to work.

Driving

Do not drive if you are taking opioid pain medicine. You must be able to wear a seat belt and turn your body to see for safe driving.

Who and when to call for problems

Call your surgeon's office for:

- Pain that is not getting better or gets worse
- Fever over 100 degrees
- Incision opening up or bleeding
- Incision becoming redder, or hard, or has pus in it
- Signs of dehydration that do not get better by drinking water
- Urine (pee) that is cloudy or smells very bad
- Blood in stools more than 3 days after surgery
- Bleeding from your rectum between bowel movements
- Nausea or vomiting that does not stop
- Not getting better as expected

Call 911 for:

- Passing out
- Sudden chest pain
- Shortness of breath that is getting worse



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