

# Your guide to Colorectal Surgery



By becoming informed and involved, patients and family members can contribute to the success of their surgery. We have developed this booklet to help you understand and prepare for your procedure. Please review this booklet with your doctor and bring it with you on the day of your pre-operative Clinic visit and also on the day of your procedure.

## Beaumont



### **Important: Please Read**

Information provided in this booklet is for educational purposes only. It is not intended to replace the advice or instruction of a professional health care practitioner or to substitute medical care. Please contact a qualified health care practitioner if you have any questions concerning your care.

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You have made an important decision to have surgery. But, did you know that the actions you take before your procedure can dramatically influence how you recover after your surgery? By learning as much as you can about your procedure and becoming actively involved in the preparation and recovery periods, you can influence your overall surgical experience! The information contained in this booklet has been designed to help you recover safely and quickly with fewer complications allowing you to go home sooner and return to your normal activity level.

Thank you for choosing Beaumont for your surgery. We will do everything we can to make your stay here as pleasant as possible. We are committed to providing exceptional patient and family centered care and we look forward to caring for you and your family soon.

## **What is Enhanced Recovery After Surgery?**

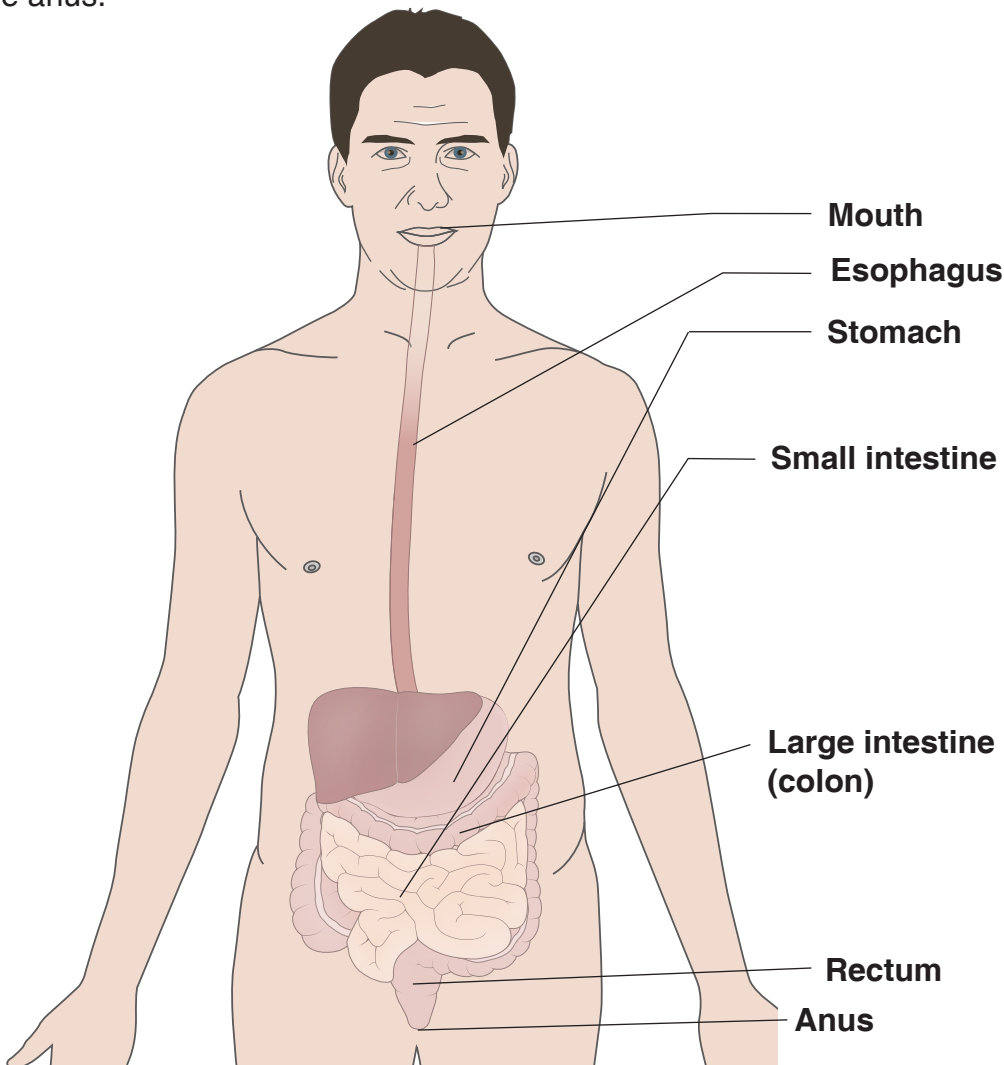
When you are admitted to the hospital for colorectal surgery, you will be participating in an Enhanced Recovery After Surgery (ERAS) program. This program is designed to help you recover quickly and safely. This booklet will: help you understand and prepare for your surgery, explain how you can play an active role in your surgical preparation and recovery and give you daily goals to achieve. Research shows that you will recover faster if you do the things explained in this booklet. Included within the booklet are instructions about eating and drinking, physical activity, and pain control.

Having surgery can be stressful for patients and their families. It is our goal for you to recover safely and quickly so that you may return to your normal activity level sooner. Please speak with your doctor and nurses if you have any questions about your care.

*Your Beaumont health care team*

# What is the digestive system?

When you eat, food passes from your mouth, through your esophagus, into your stomach. From there, it passes into the small intestine. This is where nutrients are absorbed. What is left of the food goes to the large intestine (colon), which is about 6 feet long. This is where fluid is absorbed from the food. The stool (waste that is left over) is stored in the rectum, until it is passed out of the body through the anus.

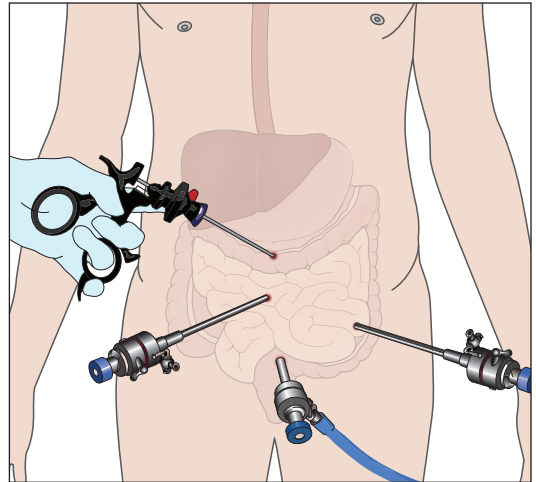


# What is colorectal surgery ?

Colorectal surgery is done to repair damage to the intestines, rectum, or anus that may result from cancer, diverticulitis, Crohn's disease, Ulcerative colitis, injury and/or obstruction. The surgery may be done in 3 ways: using a laparoscopic, open, or robotic approach. Your surgeon will talk to you about what surgical approach is best for you.

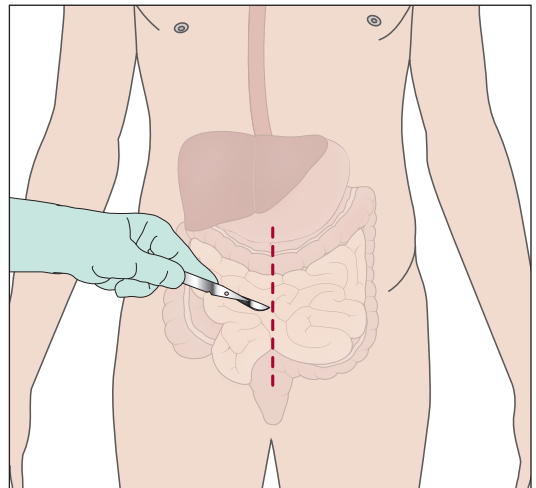
## 1. Laparoscopic

The surgeon works through 4 to 6 small cuts in your belly, using a camera and instruments. One of the cuts is used to remove part of the colon.



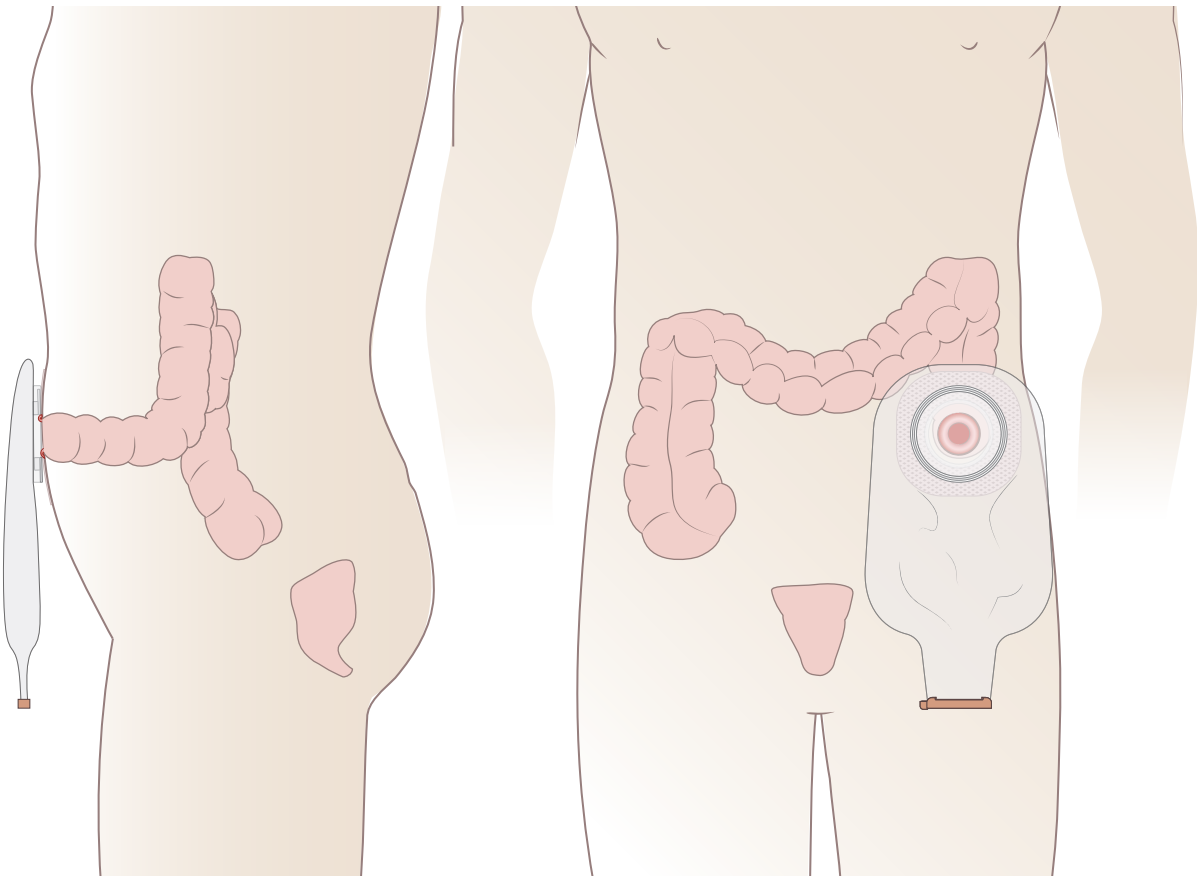
## 2. Open

The surgeon works through a 3-6 inch cut in your belly to remove part of the colon.



# What is an ostomy?

Some people may need an ostomy as part of their colorectal surgery. An ostomy is an opening in your belly where stool and waste pass out into a bag. It may be temporary or permanent. If you need an ostomy, your surgeon will talk with you about it before your surgery. You will also meet with an Ostomy nurse who will help you learn about how to take care of your ostomy.



# Mental health

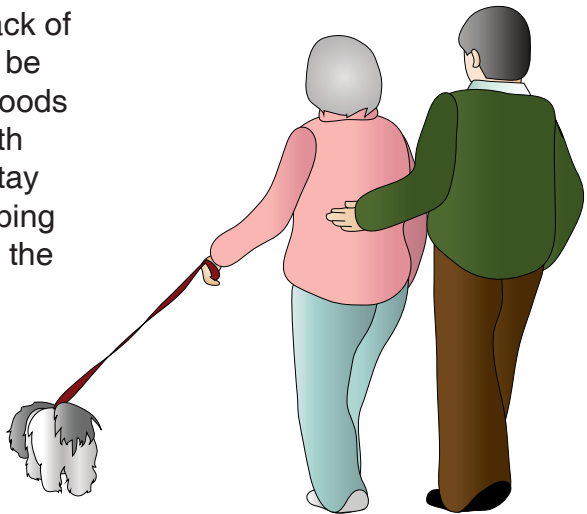
We recommend reducing your stress and anxiety level before surgery. Doing so will allow you to heal faster. Many people find meditation, focused deep breathing, and positive thinking and imagery helpful in decreasing stress. We also recommend learning as much as you can about your procedure beforehand. This will help you mentally prepare for surgery allowing you to return to your normal activity level sooner.



## Start exercising

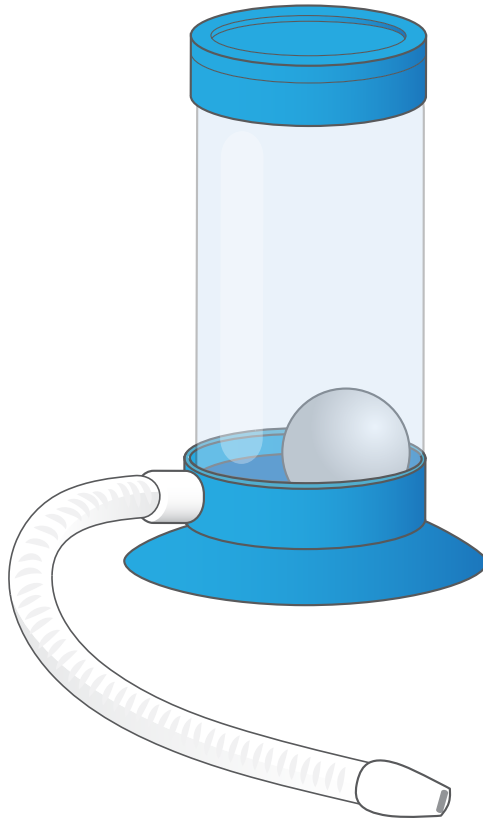
Exercise will help prepare your body for surgery and will help you to heal faster. If you already exercise regularly, keep up the good work! We suggest increasing the intensity and length of your exercise routine as your surgery approaches. Remember, exercise does not have to be strenuous! A daily 15 minute walk has been shown to be effective in preparing your body for surgery.

Many people find that walking with a pedometer is a helpful way to keep track of how far you walked. Pedometers may be purchased from almost any sporting goods store. People also find that walking with a family member or friend helps you stay motivated or on track. Malls and shopping centers are great places to walk when the weather isn't favorable.



# Lung health

You may have been provided with an incentive spirometer. This is a simple device which helps you strengthen your lungs. Practice using your incentive spirometer every day before your surgery. Doing so will help reduce your risk of developing lung infections after your surgery. You will want to bring your incentive spirometer with you on the day of your procedure so that you may continue to use it after your surgery. If you do not have an incentive spirometer, practice taking slow deep breaths at home and practice holding your deep breaths in for a few seconds before exhaling slowly.



# Stop smoking

Do NOT smoke at least 24 hours before your surgery. We recommend that you stop smoking or using any form of nicotine at least six weeks before your surgery and some surgeons may require that you quit before surgery. Patients who smoke have more complications and infections following surgery than patients who do not smoke.

Forms of nicotine that should be stopped include: cigarettes, cigars, Nicorette gum, nicotine patches, chewing tobacco, and pipes. You may contact your primary care doctor for help in quitting smoking. Beaumont Health also offers classes “Quit Smoking Now” where you will learn new strategies and problem-solving techniques to assist you in living a smoke-free life. To sign up for class, please call: 1-800-633-7377.



## Alcohol use

Do NOT drink alcohol for at least 24 hours before your surgery. Failure to do so may result in your surgery being delayed or cancelled. If you are concerned about the amount of alcohol you drink, please contact your primary care doctor for assistance in decreasing your alcohol intake.



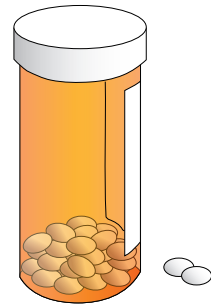
# Sleep apnea

If you have sleep apnea, you must bring your CPAP or BiPAP machine on the day of your surgery. You may be screened for sleep apnea in the STTAR (Surgical Testing and Teaching for an Accelerated Recovery) Clinic and your nurse, physician assistant, or anesthesiologist may suggest you have a sleep study done.

- ☐ Yes, I should schedule a sleep study.
- ☐ No, I do not need to schedule a sleep study.

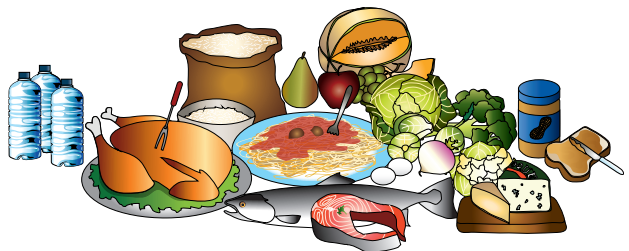
## Chronic pain medicine

If you currently take narcotic/opioid medicine to control your pain, it is important that you let your surgeon and your nurse know. You may be able to be seen by a member of our acute pain team who will be able to work with you to create a customized pain management and control plan for you. It is important that your pain be well controlled when you are here at the hospital recovering from surgery.



## Nutrition

Eating well before and after surgery is important in helping you heal and get back to your normal activity level. Eating foods that are high in vitamins, minerals and protein are helpful at preparing your body for surgery. Include whole grains, vegetables, fruits and lean proteins such as chicken, fish, eggs and peanut butter in your diet. Also, try to include foods with iron and calcium in your diet. And remember to drink plenty of fluids to stay well hydrated.



# What to drink before surgery?

You may have been provided with 15 cartons of Impact Advanced Recovery Vanilla Flavored\* drink. This product contains protein to help prepare you for surgery. For the five days before surgery, it is important that you drink three cartons of Nestle Impact Advanced Recovery each day.

## My surgeon says:

- ☐ take Impact Advanced Recovery.
- ☐ do **not** take Impact Advanced Recovery.

\*For different flavor options, try adding flavored syrups, coffee creamers, extracts or powdered drink mixes.

You may also have been provided with one bottle of Clearfast grape flavored drink. This product contains carbohydrates to help prepare you for surgery. **Please drink this drink two hours before your scheduled surgical arrival time.**

## Important: Please read

Patients with diabetes should drink smaller portions of the Impact Advanced Recovery drink six times per day and increase blood sugar monitoring. If you have any dietary restrictions or food allergies, please contact your doctor before taking.

Use the chart below to keep track of your pre-operative drinks.

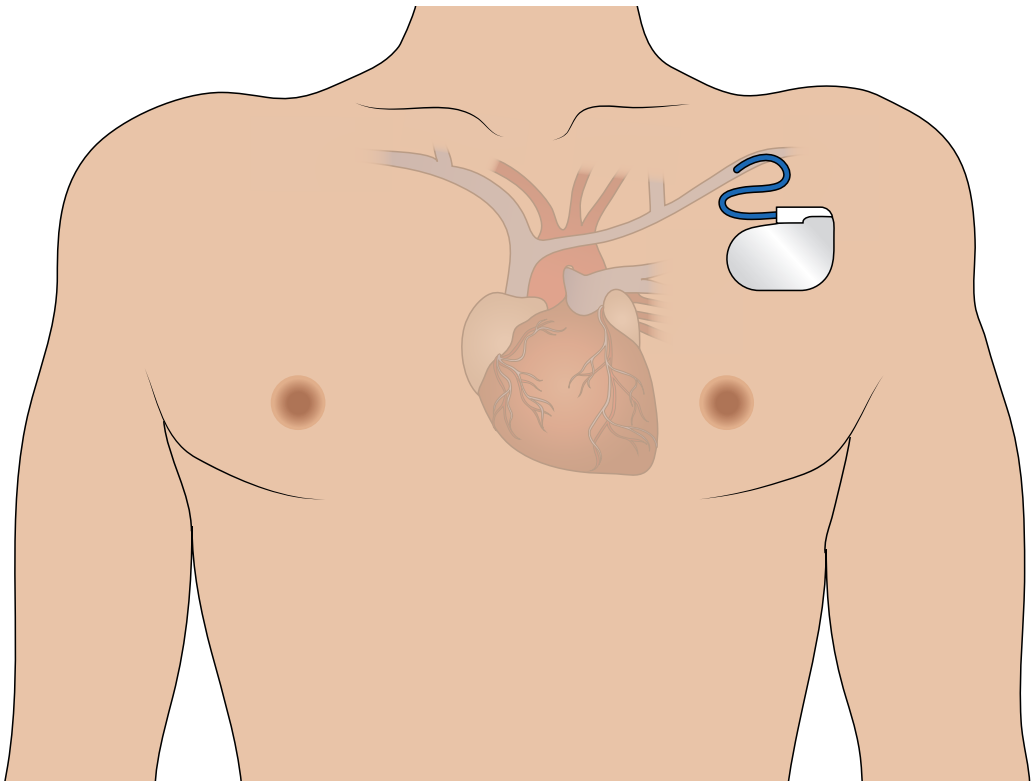
5 days before surgery ___/___/___	4 days before surgery ___/___/___	3 days before surgery ___/___/___	2 days before surgery ___/___/___	1 day before surgery ___/___/___	Day of surgery ___/___/___
<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Clearfast
<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	
<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	<input type="checkbox"/> Impact	

**Please note:** patients who are instructed to complete a bowel prep prior to their surgery may want to start consuming Impact 6 days before surgery instead of 5 days before surgery. This will allow the bowel prep to be completed 1 day before surgery.

# Implanted devices

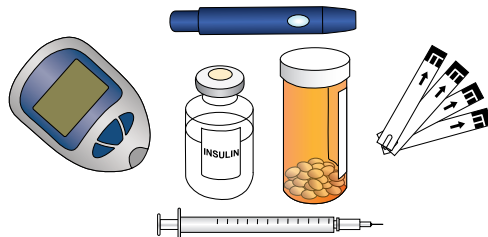
If you have a pacemaker, AICD, insulin pump, nerve stimulator or any other implantable device, please bring your ID card, equipment, and any controllers used for these devices on the day of your surgery. Pacemakers must be analyzed within six months of surgery and AICDs must be analyzed within three months of surgery.

- ☐ Yes, my AICD or Pacemaker has been analyzed within the acceptable time frame.
- ☐ No, I have not had my device analyzed and need to schedule one before surgery.



# Diabetes

If you are a patient with diabetes, it is important that you contact your endocrinologist and let them know you are scheduled for surgery. In order to promote healing and ensure the best possible outcomes following your surgery, your blood sugar should be well controlled. There will be special instructions regarding the medication you take that you must follow:



Please take \_\_\_\_\_ on the night before surgery.

On the morning of surgery, please take \_\_\_\_\_.

Your anesthesia screening nurse will provide you with information about what medication to take on the morning of your surgery. Please write down the instructions here:




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Patients who have diabetes typically have surgery early in the day. If your surgery is not scheduled early in the morning, please check your blood sugar every two hours while at home. If your blood sugar is less than 80, you can treat with: three glucose tablets, OR  $\frac{1}{2}$  cup (4 ounces) of apple juice OR  $\frac{1}{2}$  cup (4 ounces) of Sprite soda. Recheck your blood sugar after 15 minutes.

It may be unsafe for patients with high (over 250) or low (under 80) blood sugar to drive a car. Therefore, if you have high (over 250) or low (under 80) blood sugar, please have a licensed driver drive you to Beaumont for your surgery. When you check in for surgery, please let the person sitting at the waiting room desk know that you need to have a nurse check your blood sugar right away.

# Pain

Pain is an unpleasant feeling following injury. Many patients experience pain differently (aching, cramping, sharp, dull, throbbing) and many procedures result in different types of pain. It is important that you work with your surgeon to develop an individualized pain management and treatment plan.

## Before surgery, ask your surgeon:

- How much pain should I expect after surgery?
- What type of pain will I experience?
- How long will the pain last?
- When will the pain be at its worst?



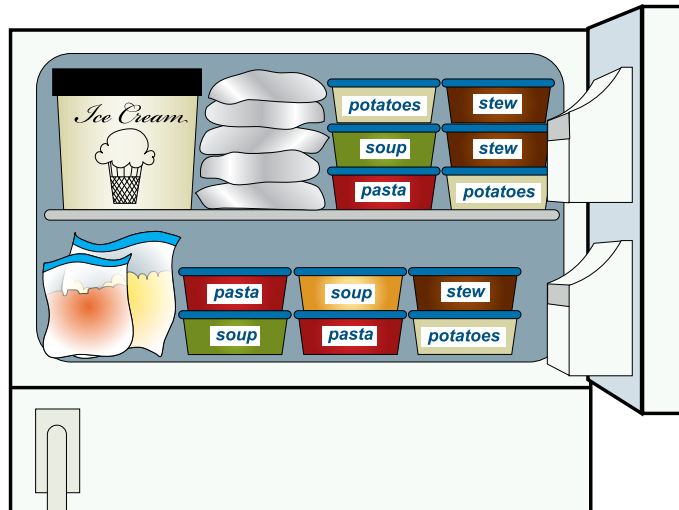
# Your companion

Patients who have a supportive person to assist them with their recovery do better after surgery. We recommend reviewing this booklet together with your family member. Remember, your primary responsibility after surgery is to focus on recovery. Consider arranging for a friend or family member to assist you with household work and other necessary errands during the days immediately following your surgery. This will allow you to focus on getting better!



# Planning ahead around the house

You may need help with meals, laundry, bathing or cleaning, when you go home from the hospital. Stock your fridge and freezer with food that is easy to reheat. Make plans with your family and friends so you will have the help you need.



## Arrange transportation

When it is time for you to leave the hospital, you will need an adult companion with a valid drivers license to drive you home. You will not be allowed to drive yourself home.



# Pre-operative visit

If you are having surgery at the Royal Oak or Troy campuses, you may be asked to will visit the Surgical Testing & Teaching for An Accelerated Recovery (STTAR) Clinic prior to your surgery.

You will be contacted by a nurse from the Anesthesia Department before your Clinic Visit and she will review your medical and surgical history and will set up the Clinic visit if needed. Here, you:

- Will meet with a healthcare professional that will review your medical history and educate you on how to fully prepare for your upcoming surgery. He or she will also explain what to expect while you are in the hospital
- Will have blood work done and/or any other testing conducted that is required before your surgery
- May be referred to another doctor (specialist) if you have other medical problems
- Will be offered a tour of the hospital
- Will have your pre-surgical history and physical conducted
- Will meet with an ostomy or “stomal” nurse if you are scheduled to receive an ostomy following your surgery

If you have any questions, you may contact the Anesthesia Prescreening Nurses at:

Royal Oak: (248)273-8100

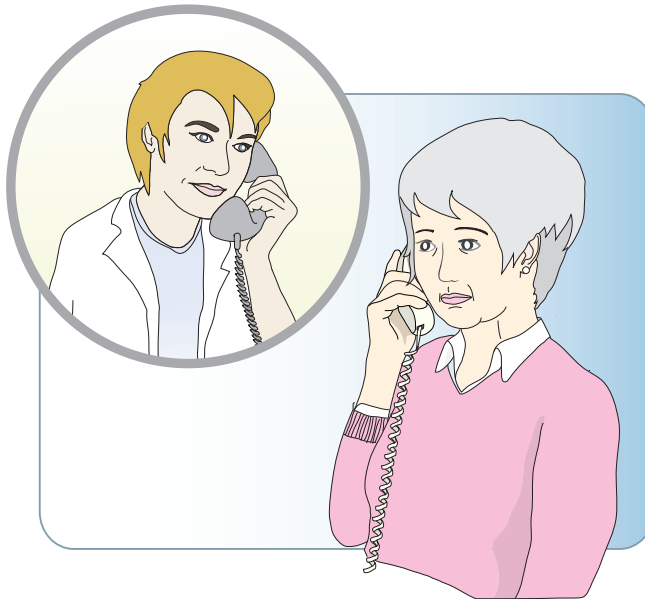
Troy: (248)964-4810

Grosse Pointe: (313)473-1779



# Phone call from Surgical Scheduling

The day before your surgery, the Surgery Department will phone you to tell you when to come to the hospital. They will give you an arrival time rather than an exact surgical time. This is because surgery time is not exact and can occur earlier or later than planned.



Date of surgery: .....



Time of arrival at the hospital: .....

# Washing

## Pre-surgical cleansing

Before your surgery, you must shower with an antibacterial soap. You may purchase antibacterial soap at your local pharmacy or the hospital pharmacy. Shower with an antibacterial soap for two nights prior to your operation and again on the morning of your surgery.

Do NOT shave or wax the operative area for seven days prior to your surgery. Shaving and waxing can cause small cuts on your skin which can lead to an infection.



Use the chart below to keep track of your pre-surgical cleansing.

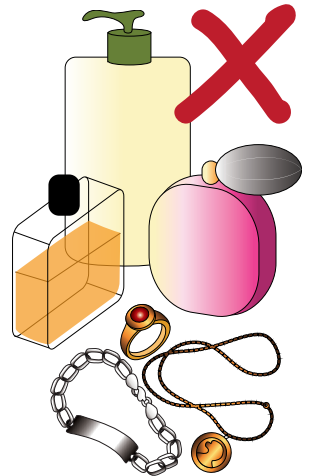
2 days before surgery ____/____/____	1 day before surgery ____/____/____	day of surgery ____/____/____
<input type="checkbox"/> Antibacterial shower	<input type="checkbox"/> Antibacterial shower	<input type="checkbox"/> Antibacterial shower

The night before surgery:

- Take a shower using the antibacterial liquid soap
- Wash your body from the neck down, including your belly button
- Use regular soap and shampoo for your face and hair
- Wear clean clothes to bed

The morning of surgery:

- Take a shower using the antibacterial liquid soap
- Put on clean clothes
- Do not wear lotion, perfume, powder, deodorant, jewelry, or ear/body piercings



# Bowel prep

Bowel preparation is used to help empty out the contents of your digestive system before surgery. Some people need to have a bowel prep the day before their surgery. Your surgeon will decide if you need to complete a bowel prep. If you must complete a bowel prep, it is important that you closely follow all the instructions given to you by your surgeon. Failure to do so may result in your surgery being delayed or cancelled.

**My surgeon says:**

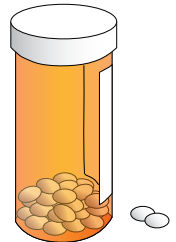
- ☐ I need a bowel preparation
- ☐ I do not need a bowel preparation

# Oral antibiotics

Oral antibiotics are used to get rid of harmful bacteria that may be present in your gut before surgery.

**My surgeon says:**

- ☐ I need to take oral antibiotics before surgery
- ☐ I do not need to take oral antibiotics before surgery



Instructions for oral antibiotics:

Please take \_\_\_\_\_ pills of \_\_\_\_\_ every \_\_\_\_\_ for \_\_\_\_\_ days before surgery.

# My surgery schedule

My procedure is: \_\_\_\_\_

My scheduled arrival time is: \_\_\_\_\_

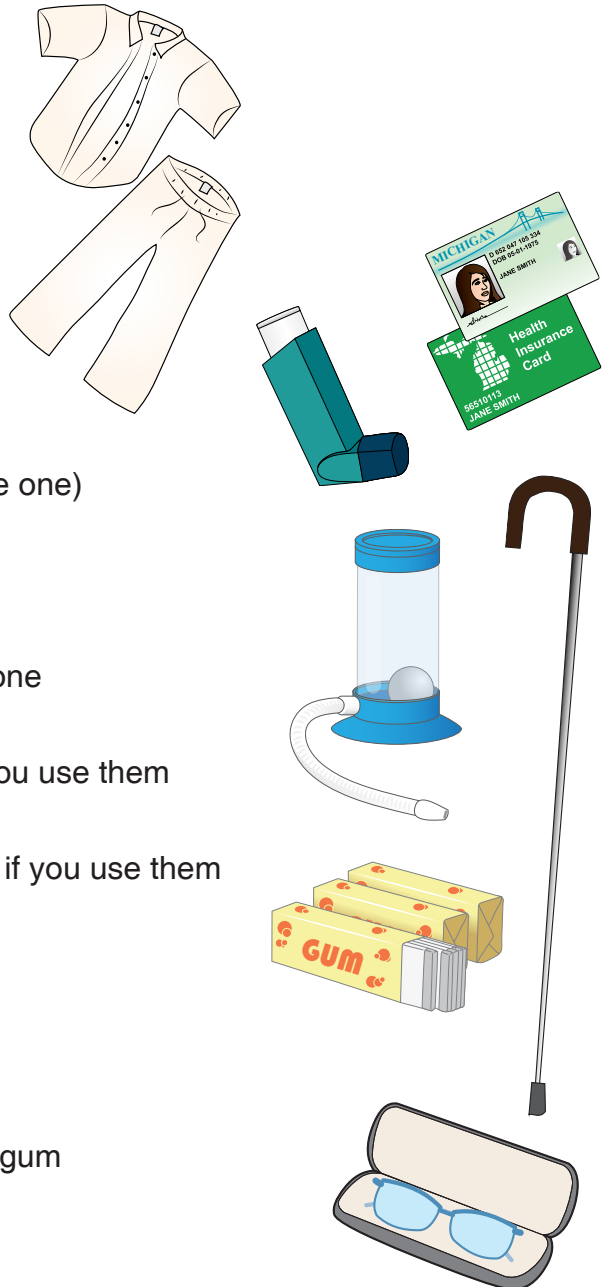
My procedure will last: \_\_\_\_\_

My expected date of discharge is: \_\_\_\_\_



# Things to bring to the hospital

- ❑ this booklet
- ❑ your picture ID
- ❑ your insurance card
- ❑ a list of all your medications
- ❑ your inhaler if you use one
- ❑ your incentive spirometer (if you have one)
- ❑ respiratory equipment if you use any
- ❑ CPAP or BiPAP machine if you use one
- ❑ glasses, contacts or hearing aids if you use them
- ❑ wheelchair, cane, crutches or walker if you use them
- ❑ loose fitting comfortable clothes
- ❑ a comfort item from home (optional)
- ❑ three packs of your favorite chewing gum



# Medication

**Take the following medication(s)\*:**

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**Do not take the following medication(s)\*:**

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**You will receive a call from a nurse letting you know what medications you can and cannot take before your surgery.**

- Do not take Mobic (meloxicam), Relafen or Daypro for ten days before your surgery.
- Do not take Vitamin E, Fish Oil or herbal medications for 14 days before your surgery.
- Do not take Aspirin for seven days before your surgery unless directed to do so by your cardiologist or surgeon.
- Do not take diet medications for 14 days before your surgery.
- Do not take Ibuprofen, NSAIDs or Aleve for three days before your surgery.
- Talk to your prescribing doctor about any anticoagulants/blood thinners/anti-platelet medication you take as there may be special instructions to follow regarding how to take it.

# At the hospital

## At home

- Stop eating solid foods at 10pm the night before your surgery. Patients who need to complete a bowel prep before surgery may have to stop eating solid foods earlier. Please talk to your doctor if you have any questions.
  - If provided with Clearfast, please drink your Clearfast 2 hours before your arrival time at the hospital.
  - You may drink clear liquids up until two hours before your scheduled arrival time. Examples of approved clear liquids include: Apple juice, cranberry juice, grape juice, Kool Aid, Gatorade and water. For example, if your arrival time is 8am you must stop drinking clear liquids by 6am.
  - Do not wear lotion, perfume, powder, deodorant, jewelry, or ear/body piercings
- 
- After check-in, you will be brought to the procedure suite where you will be examined by a nurse and members of the anesthesia team and asked a series of questions.
  - For your own safety, you will be asked many of the same questions by all the members of your care team.
  - You may receive medicine to help you relax. An intravenous (IV) line will be started. You will receive fluids and medicine through your IV.
  - Your family members and/or friends will be asked to sit in the waiting area while a nurse brings you into the operating room.
  - We will do everything possible to start your procedure on time. However, there may be instances when delays occur due to emergencies. We apologize for any delays which may occur and appreciate your understanding.

# During the procedure

- You will not feel any pain during the procedure and will not remember it afterwards.
- Your heart rate, blood pressure, temperature and blood oxygen level will be continuously checked and monitored throughout the procedure.
- Your family members and/or friends will sit in the waiting room during your surgery. Your surgeon will come speak to them once the procedure is complete.
- Family members, friends, and companions will be notified of the patient's room assignment toward the conclusion of the procedure and once assigned, the patients will be reunited with their companions in the hospital room.
- All Beaumont hospital locations have free Wi-Fi available for visitor and patient use.
- Family members, friends, and companions are welcome to bring mobile devices to the hospital.



# Recovery room

- You will wake up from anesthesia in the recovery room or Post-Anesthesia Care Unit, sometimes called the PACU.
- During your stay in the PACU, your vital signs, pain, nausea, surgical dressings, and heart rhythm will be assessed.
- You will need to stay in the recovery room where you will be watched until you are alert and your vital signs are stable.
- The length of time you will spend in the recovery room will vary because some individuals take longer than others to wake up after anesthesia.
- Patients coming out of anesthesia react in different ways. You may be sleepy, have a sore throat or feel sick to your stomach. These reactions are normal and will go away as the anesthesia wears off.
- You may be receiving oxygen through your nose.
- You will be offered ice chips and something to drink once you start to wake up.
- Most patients spend between one and two hours in the recovery room.
- Family members, companions, and friends will be updated regularly regarding the status of the patient's recovery.
- You will be reunited with your loved ones once you have been brought to your hospital room where you will be spending the night.

# Beaumont Colorectal

**DAY of  
SURGERY**

**Eating and Drinking**

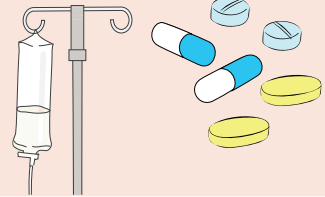
Liquids and gum



**Pain**

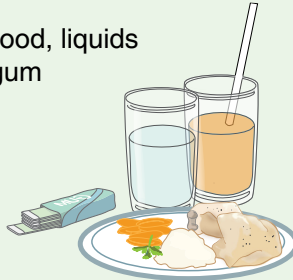
1 2 3 4 5 6 7 8 9 10

below 4



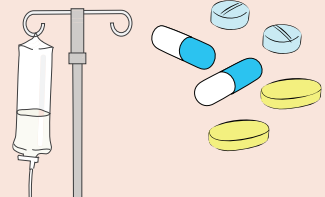
**1  
DAY AFTER  
SURGERY**

Soft food, liquids  
and gum



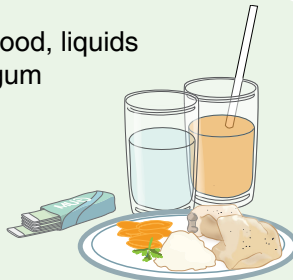
1 2 3 4 5 6 7 8 9 10

below 4



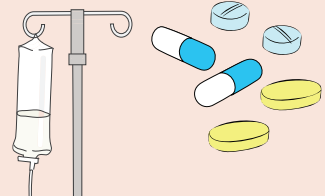
**2  
DAYS AFTER  
SURGERY**

Soft food, liquids  
and gum



1 2 3 4 5 6 7 8 9 10

below 4



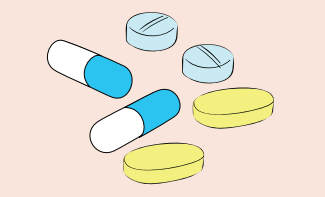
**3  
DAYS AFTER  
SURGERY**

Soft food, liquids  
and gum



1 2 3 4 5 6 7 8 9 10

below 4



# Surgery Recovery

## Breathing Exercises

10 times  
every hour  
when awake



10 times  
every hour  
when awake



10 times  
every hour  
when awake

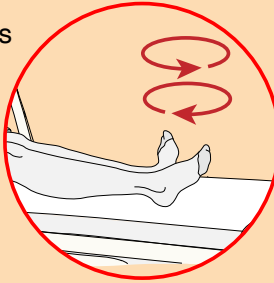


10 times  
every hour  
when awake

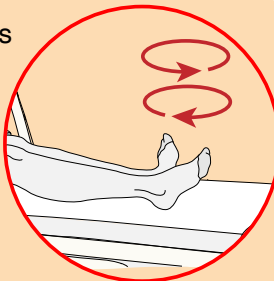


## Leg Exercises

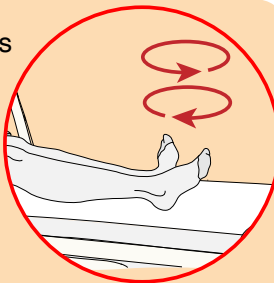
10 times  
every hour  
when awake



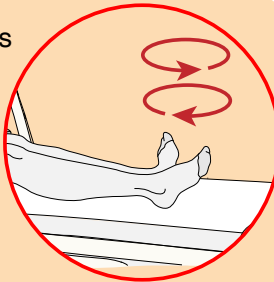
10 times  
every hour  
when awake



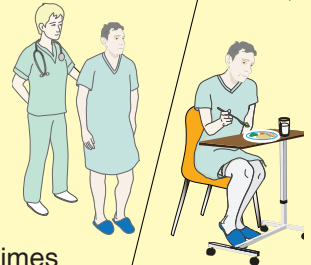
10 times  
every hour  
when awake



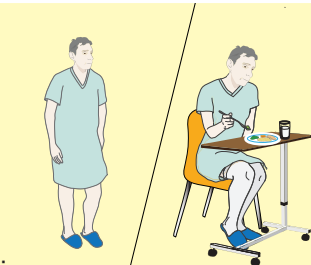
10 times  
every hour  
when awake



## Activities



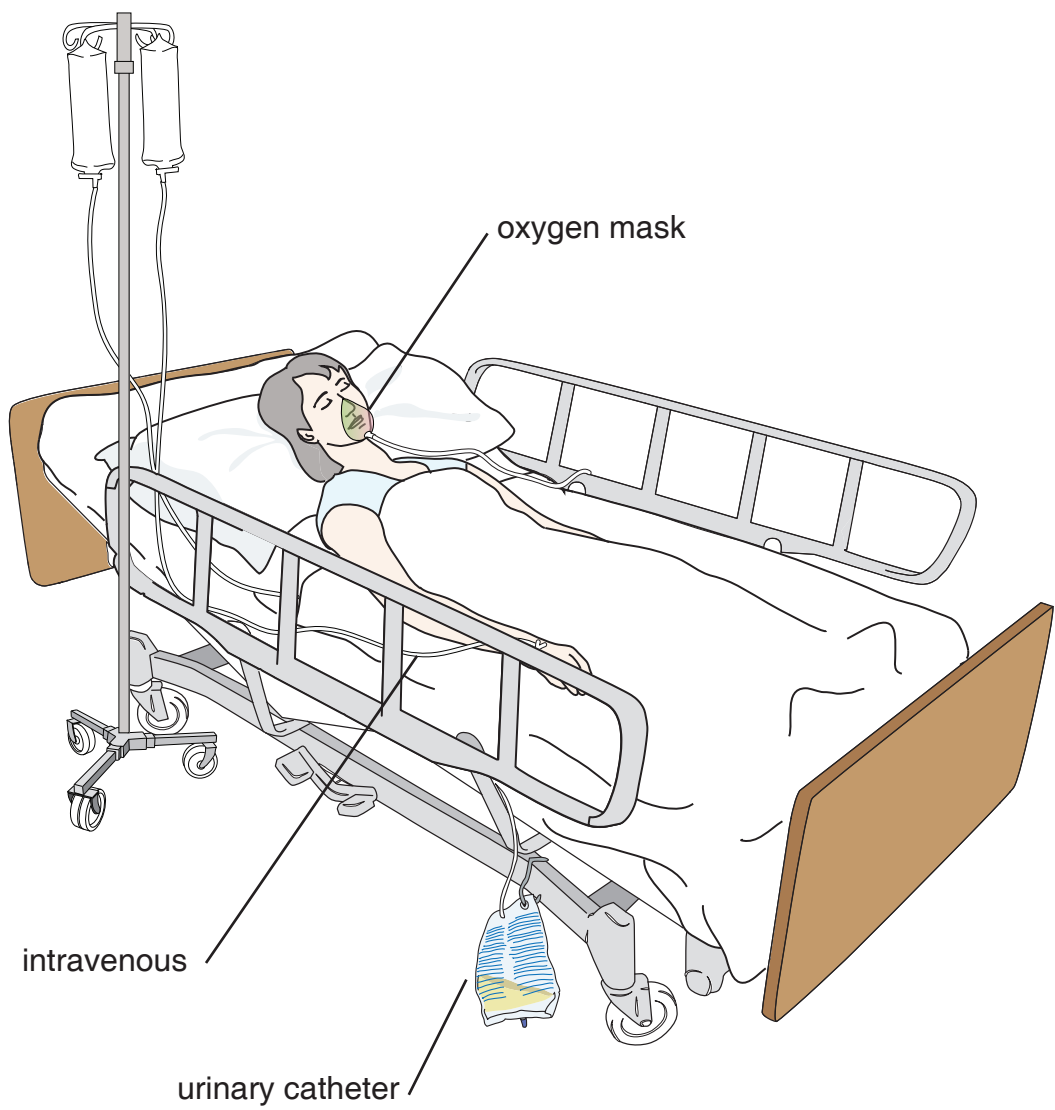
4 times



4 times



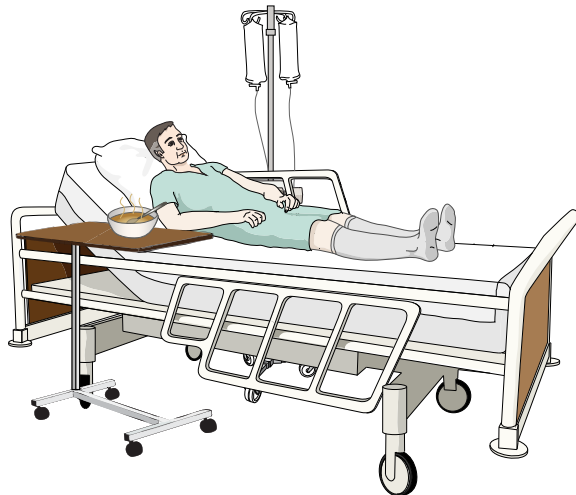
# Recovery room



# What should I be doing after my surgery?

Once your vital signs have been stabilized and you have recovered from anesthesia, you will be transported to your room where you will be spending the night. Most patient rooms are semi-private meaning you will be placed in a room with another person of the same sex. Each room is equipped with one restroom and each patient has their own television. Once on the unit, you will be introduced to your nurse and nurse assistant. Every hour, a nurse will stop by your room to check on you. You will also be provided with the direct phone number of your nurse and you will have a call-light on your bed. Within your room, a white board will be hung and your daily goals will be written there for you.

The nursing team will keep track of your daily intake and output to make sure you are taking in enough fluids and urinating adequately. They will routinely assess your pain and ask how you are doing. Your health care team will encourage you to get up and walk and to sit up in a chair for all of your meals. You may have Sequential Compression Devices (SCDs) on your legs which help keep blood flowing preventing blood clots by pumping your legs. You will also be asked to use your incentive spirometer to prevent fluids from collecting in your lungs which can cause pneumonia.



# Pain control

It is important to control your pain because it will help you to:

- Take deep breaths
- Sleep well
- Move more easily
- Recover faster
- Eat better
- Do things that are important to you

Your nurse may ask you to describe your pain using a number between 0 and 10. 0 means no pain and 10 is the worst pain you can imagine. We want to keep your pain below 4/10. Please tell us if you have pain. We will help you.

Pain Score	Symptoms
0	Pain free
1	Very minor annoyance – I have occasional minor twinges.
2	Minor annoyance – I have minor annoyance.
3	Annoying enough to be distracting.
4	Can be ignored if busy, but still distracting.
5	Can't be ignored for more than 30 minutes.
6	Can't be ignored for any length of time but can still work and do social activities.
7	Makes it difficult to concentrate. Interferes with sleep. You can still function with effort
8	Physical activity severely limited. You can read and speak with effort. Experience nausea and dizziness.
9	Unable to speak. Crying out or moaning uncontrollably.
10	Either you are unconscious or it makes you want to pass out.

# Pain control

After surgery, tell your surgeon or nurse if:

- if your pain is above 4/10 and is not getting better with medication
- if you are experiencing negative side effects of the pain medicine
- if you are experiencing a new type of pain
- if you are experiencing nausea or have vomited

Our goal is to actively manage and treat your pain because patients with well controlled pain recover faster. In order to best control your pain, you will be given a combination of narcotic and non-narcotic medication to help manage your pain. Some patients may also find that holding a pillow or blanket against your abdomen may be helpful at relieving pain when coughing or deep breathing. Your doctor or nurse will ask you what your pain level is several times a day.



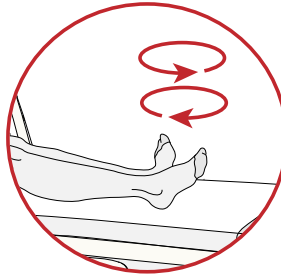
Keeping track of your pain will help your medical care team effectively treat and manage your care. Remember to keep track of any side effects you may be experiencing as a result of the pain medication. It is also important to note that pain at rest is different than pain associated with activity. Often, patients experience more pain during activity than when at rest.

# Exercises

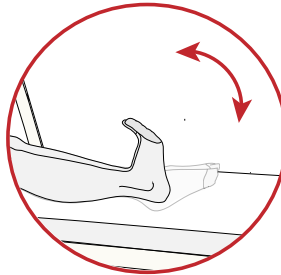
It is important to move around in bed to prevent blood clots, and muscle weakness. Start these exercises when you wake up and continue them while you are in the hospital.

## Leg exercises

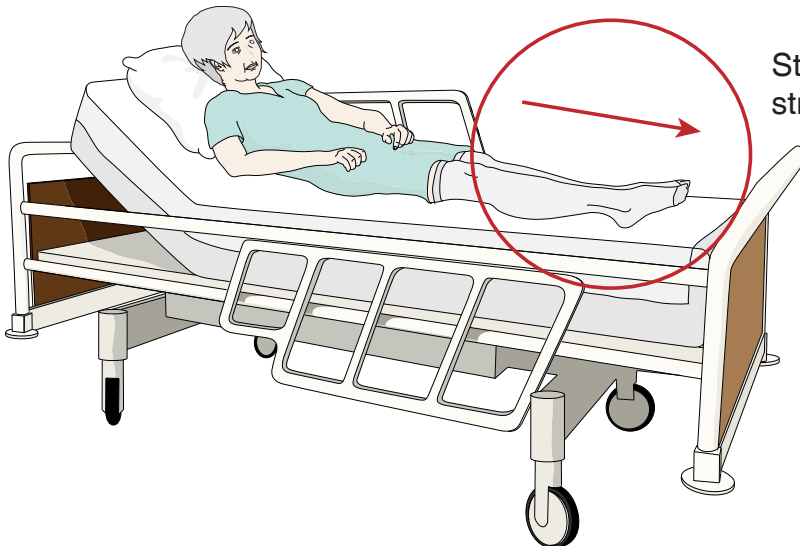
These exercises help your blood to circulate in your legs. Repeat each exercise 10 times every hour when you are awake.



Rotate your feet to the right and left.



Wiggle your toes and bend your feet up and down.



Stretch your legs out straight.

# Exercises

## Coughing and deep breathing exercises:

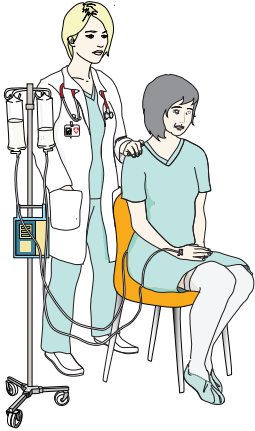
- An incentive spirometer is a device that helps you breathe deeply to prevent pneumonia and promote lung health.



To use your incentive spirometer:

- Put your lips around the mouthpiece, breathe in as deeply and as quickly as possible. Hold your deep breath for about 2 seconds
- Remove the mouthpiece, breathe out, and rest for a few seconds
- Repeat this exercise 10 times every hour while you are awake
- Take a deep breath and cough using a small blanket or pillow to support your incision

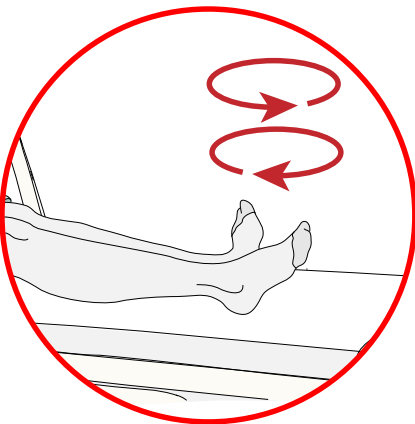
# Goals for the evening of surgery



Get up and sit in a chair with your nurse's help.



Drink clear liquids if tolerated. Chew gum for 30 minutes to help your bowels start to work.



Do your leg exercises (see page 32).



Do your breathing exercises (see page 33).

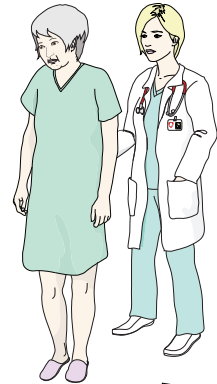
# Goals for Day 1

## Breathing

- Do your breathing exercises

## Activities

- Sit in a chair for meals
- Walk in hallway for 20 minutes, four times per day
- Be out of bed, off and on, for a total of 6 hours, as tolerated



## Pain control

- Tell your nurse if your pain reaches 4/10 on the pain scale
- Complete your pain diary (on page 52)

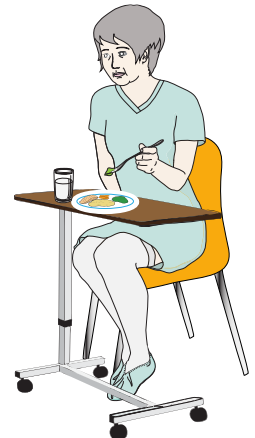


## Eating and drinking

- Drink liquids, including protein drinks like Ensure or Boost
- Eat soft food as tolerated
- Chew gum for 30 minutes 3 times/day

## Tubes and lines

- For some patients, your catheter will remain in longer, depending on what type of colon or rectal surgery that you have.
- Your IV will be disconnected when you are eating and drinking well. However, for safety reasons, your nurse will leave the IV access port in place until time of discharge from the hospital.



# Goals for Day 2 through discharge

## Breathing

- ☐ Do your breathing exercises

## Activities

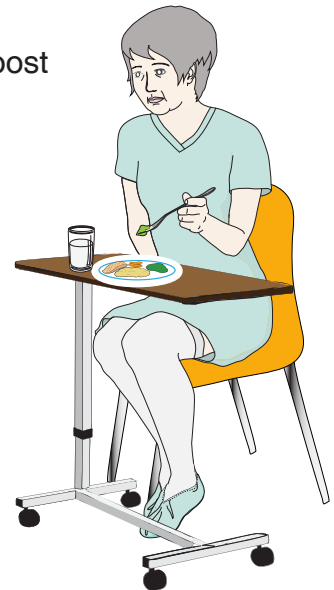
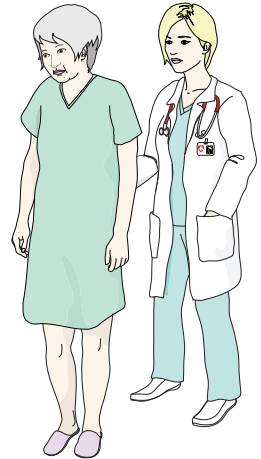
- ☐ Sit in a chair for meals
- ☐ Walk in the hallway for 20 minutes, four times per day
- ☐ Be out of bed, off and on, for a total of 6 hours

## Pain control

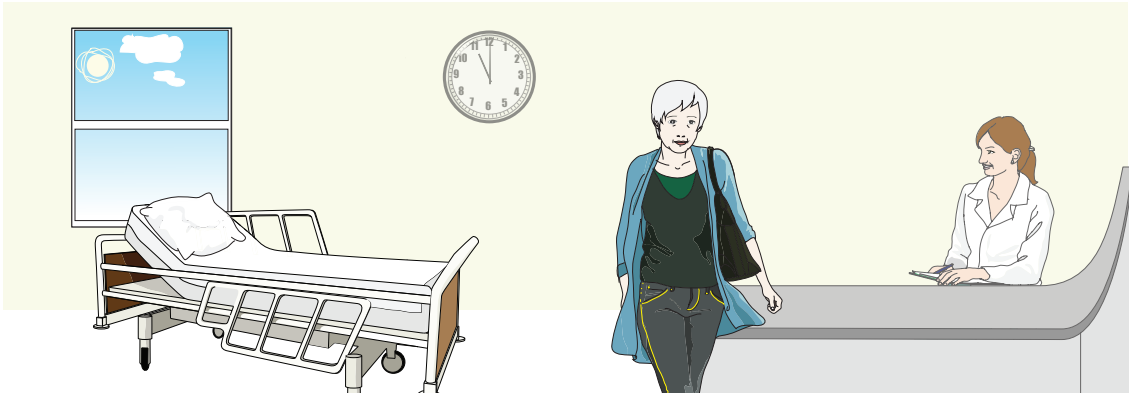
- ☐ Tell your nurse if your pain reaches 4/10 on the pain scale
- ☐ Complete your pain diary (on page 52)

## Eating and drinking

- ☐ Drink liquids, including protein drinks like Ensure or Boost
- ☐ Eat soft food as tolerated
- ☐ Chew gum for 30 minutes 3 times/day



# Leaving The Hospital



Home is the best place for you to recover! You will be discharged from the hospital once your doctor determines that it is safe to do so. A family member, companion or friend must be present to take you home.



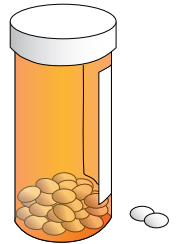
Some patients may need to visit a rehabilitation facility or extended care facility after their surgery. A member of our Care Management team will help coordinate this care for you, if needed.

# Medication

Your doctor may tell you to take medicine when you are home. It is important that you follow all your doctor's instructions. If you have any questions about your medications please ask your doctor.

Before you leave the hospital, make sure you understand your surgeon's instructions such as,

- What pain medication am I taking?
- Why am I taking it?
- How long should I take it for?
- What are the potential side effects I should watch out for?



## Follow-up appointment and test results

We will give you information about your follow up appointment with your surgeon before you leave the hospital. This appointment will take place two to six weeks after your surgery.

If you have clips or stitches to be removed, we will arrange an appointment to remove them.

You will be notified of any test results once they are available.

Please contact your surgeon directly if you have not received results of any testing that was done for you.

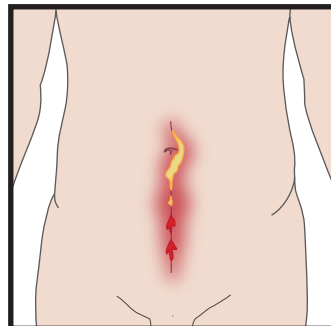
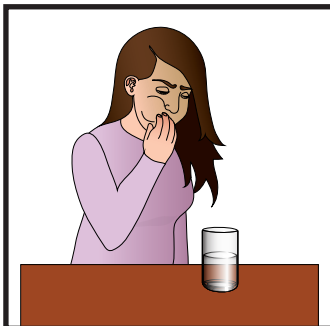
My follow-up appointment is scheduled for:

---



# Once home, call your doctor or surgeon if you:

- have pain that is not getting better with medication
- are experiencing unpleasant side effects of pain medication
- develop a fever above 101 °F for more than 24 hours
- experience trouble breathing such as shortness of breath or chest pain
- cannot drink fluids or keep them down
- have pain that gets worse and is not relieved by medication
- have a surgical site that becomes red, warm or has drainage
- have a nosebleed or cough with more than a few tablespoons of blood



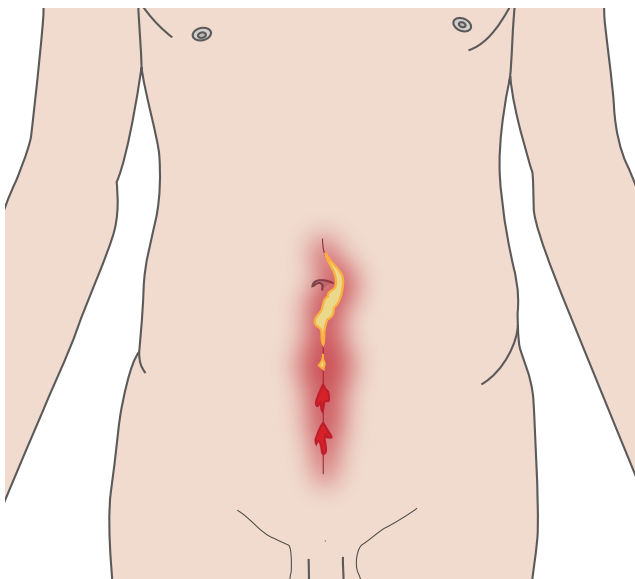
# Pain

- You may have pain for a few weeks after surgery. Take acetaminophen and your anti-inflammatory to relieve your pain.
- If your pain is not controlled by acetaminophen and the anti-inflammatory, add the narcotic that your doctor ordered.
- If the anti-inflammatory or other pain medicine cause burning or pain in your stomach, stop taking them and call your surgeon.
- While at home, your pain should be a 4/10 or lower. If you have severe pain that is not relieved with medicine, call your surgeon or go to the emergency room.
- Please keep track of your pain at home using the Pain Diary found on page 52.



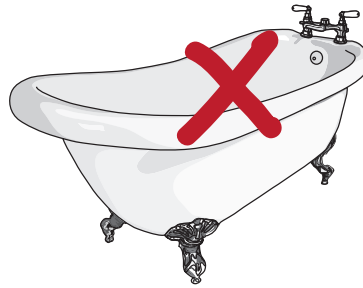
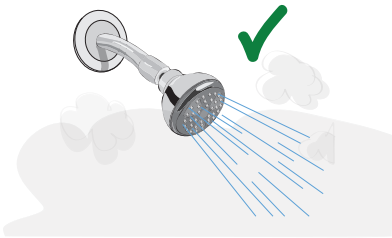
# Incision

- Your incision and the area surrounding it might be numb.
- Contact your surgeon if your incision becomes red, warm or hard and if you see pus or drainage coming out of it.



# Bathing

- Your surgeon will let you know when you may shower.
- Do NOT swim in a pool or hot tub or soak in a bath tub for six weeks following your surgery.
- Do not scrub your incision. Gently wash the area and let water run over it.



# Bowels

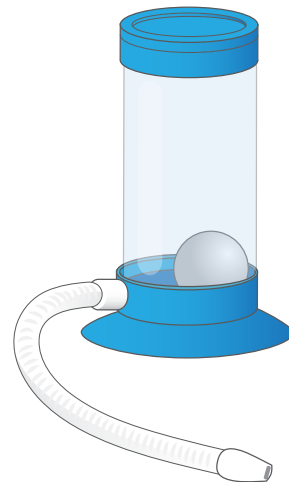
- Your bowel habits may change after your surgery. You may have loose stools or be constipated.
- Your bowel habits should become more routine after a few weeks.

Some medicines and foods cause constipation. If you become constipated, drink plenty of fluids, eat whole grains, and continue to exercise.



# Breathing and limb exercises

- It is important to continue your deep breathing exercises once you get home.
- Continue to use your incentive spirometer to help prevent lung infections.
- You should continue to do your leg exercises once you get home.
- Your leg exercises will help stimulate blood flow and prevent blood clots.



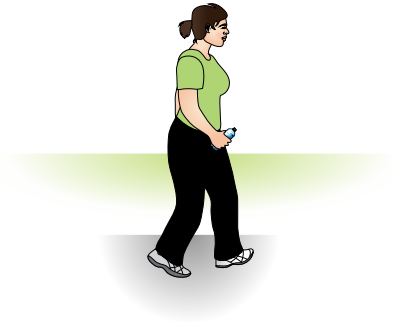
## Diet

- You may eat and drink anything you want unless directed otherwise from your surgeon. There may be some foods that your surgeon asks you to avoid until your post-operative appointment. Talk with your doctor before you leave the hospital about what you can and cannot eat.
- If you cannot drink fluids or keep them down, contact your surgeon right away.
- You can drink nutritional beverages such as Ensure or Boost to help make sure you receive enough nutrients in your diet.



# Activity

- It is important that you continue to walk several times a day once you are home.
- Avoid lifting anything greater than 5 pounds until four to six weeks after surgery.
- Avoid driving until you are no longer taking narcotic pain medication.
- Once you are free of pain, you may resume normal activities, including sexual intercourse.
- Your surgeon will determine when you are able to return to work depending on your recovery and type of work.
- Ask family members and friends for help with meal preparation, grocery shopping, house cleaning, and laundry.



## Summary

When you get home, it is important to continue:

- deep breathing exercises
- leg exercises
- daily walks
- eating a well-balanced diet
- drinking plenty of fluids

Research has shown that you will have less complications and return to your normal activity level sooner if you follow these simple instructions.

# Appendix

You will find useful information about your procedure in this appendix.

## Important phone calls

Before your surgery, you will receive several phone calls from Beaumont.

Who	Why
Registration	You will provide general contact information and insurance information.
Anesthesia pre-screening nurse	You will provide information regarding your medical and surgical history. You may be asked to schedule an appointment at the Surgical Testing and Teaching for an Accelerated Recovery (STTAR) Clinic if you are having surgery at Troy or Royal Oak.
Surgical scheduling office	You will be provided with your surgical time and information regarding where to park and where to go on the day of your procedure.

## Important phone numbers

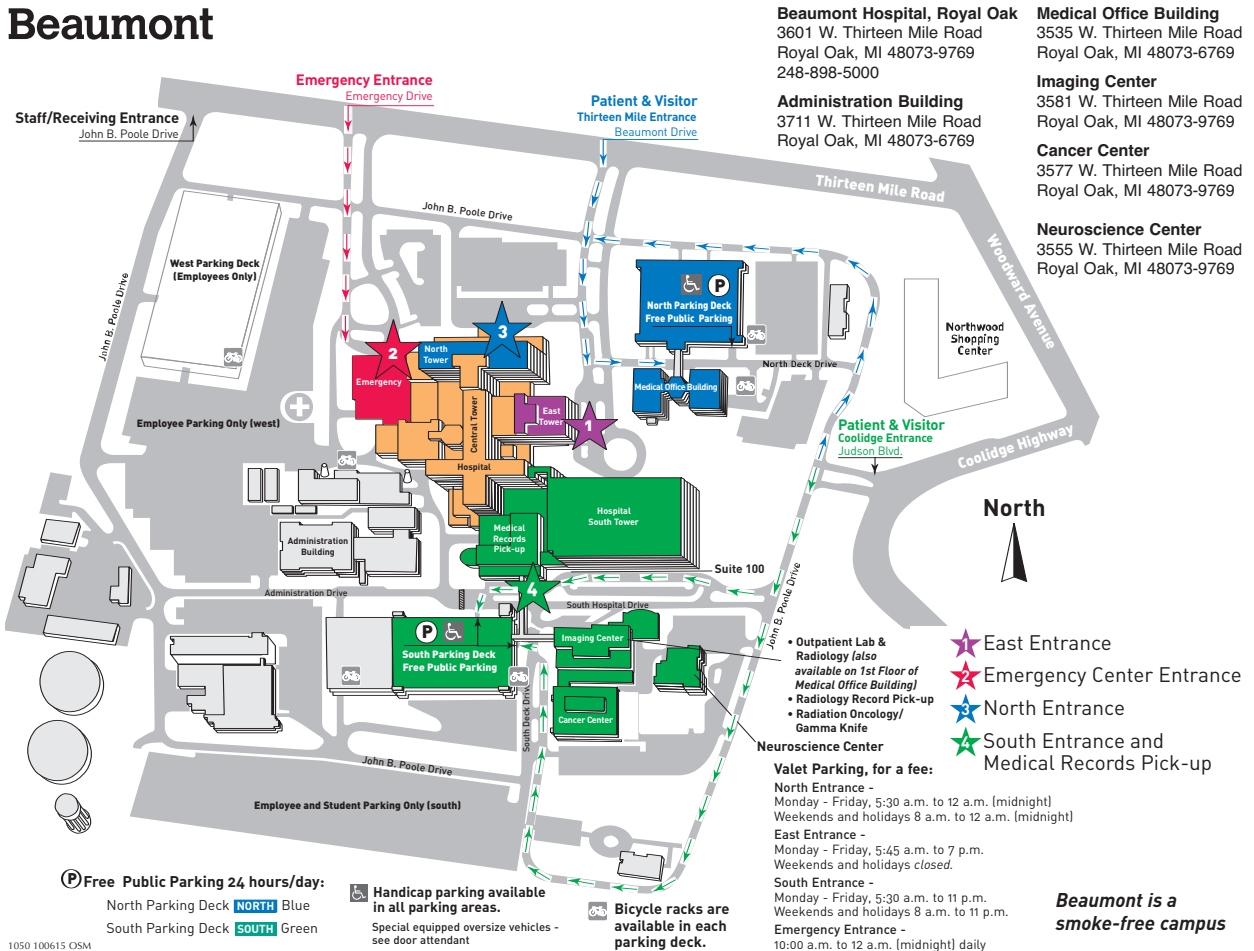
Location	Phone number/website
Royal Oak	248-898-5000 <a href="http://beaumont.org/locations/beaumont-hospital-royal-oak">beaumont.org/locations/beaumont-hospital-royal-oak</a>
Troy	248-964-5000 <a href="http://beaumont.org/locations/beaumont-hospital-troy">beaumont.org/locations/beaumont-hospital-troy</a>
Grosse Pointe	313-473-1000 <a href="http://beaumont.org/locations/beaumont-hospital-grosse-pointe">beaumont.org/locations/beaumont-hospital-grosse-pointe</a>

<b>You primary care doctor:</b>	
<b>Your surgeon:</b>	
<b>Your pharmacy:</b>	

# Map of Royal Oak

**Address:** 3601 West 13 Mile Road, Royal Oak, MI 48073

## Beaumont



## Online map:

[www.beaumont.edu/patients-visitors/locations-maps-and-directions/beau-mont-royal-oak-campus/](http://www.beaumont.edu/patients-visitors/locations-maps-and-directions/beau-mont-royal-oak-campus/)

# Map of Troy

**Address:** 44201 Dequindre Road, Troy, MI 48085

## Beaumont Hospital – Troy

44201 Dequindre Rd.  
Troy, MI 48085  
248-964-5000

## Area C Suites

44199 Dequindre Rd.  
Troy, MI 48085

## Physician Office Building and Cancer Center

44344 Dequindre Rd.  
Sterling Heights, MI 48314

## Radiation Oncology

44378 Dequindre Rd.  
Sterling Heights, MI 48314

## Family Medicine Center/ Outpatient Services Center

44250 Dequindre Rd.  
Sterling Heights, MI 48314

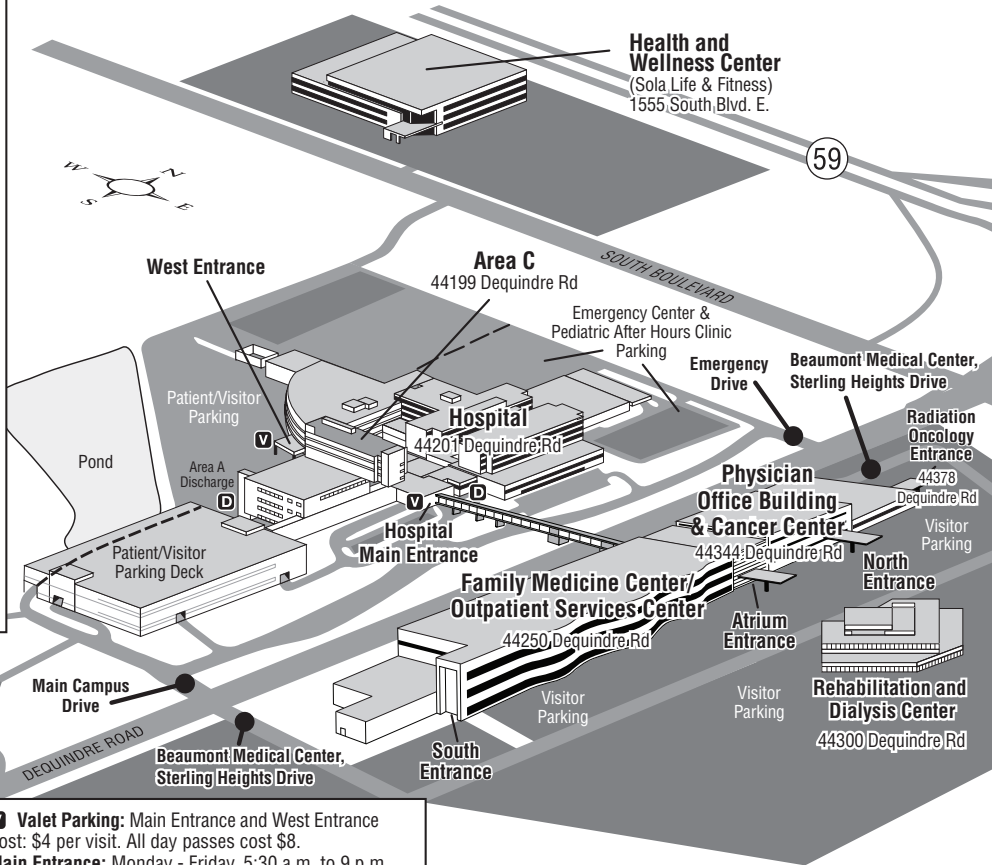
## Rehabilitation and Dialysis Center

44300 Dequindre Rd.  
Sterling Heights, MI 48314

## Health and Wellness Center

(Sola Life & Fitness)  
1555 East South Boulevard  
Rochester Hills, Michigan 48307

**Health and  
Wellness Center**  
(Sola Life & Fitness)  
1555 South Blvd. E.



**Free Patient and Visitor  
Parking:** Parking Deck  
and Sterling Heights  
Campus Lot

**D Patient Discharge Door**

4561 051316 DSM

**V Valet Parking:** Main Entrance and West Entrance  
Cost: \$4 per visit. All day passes cost \$8.

**Main Entrance:** Monday - Friday, 5:30 a.m. to 9 p.m.  
Weekends & holidays, 8 a.m. to 9 p.m.

**West Entrance:** Monday - Friday, 6 a.m. to 4 p.m.  
Weekends & holidays, Closed.

**Beaumont**

**Online map:**

[www.beaumont.edu/patients-visitors/locations-maps-and-directions/beaumont-troy-campus/](http://www.beaumont.edu/patients-visitors/locations-maps-and-directions/beaumont-troy-campus/)

# Map of Grosse Pointe

**Address:** 468 Cadieux, Grosse Pointe, MI 48230

## Beaumont

468 Cadieux Road  
Grosse Pointe, MI. 48230  
(west of Jefferson)  
313-473-1000

**Valet Hours:**  
Monday - Friday 7:00 am - 8:00 pm  
Saturday & Sunday 9:00 am - 5:00 pm

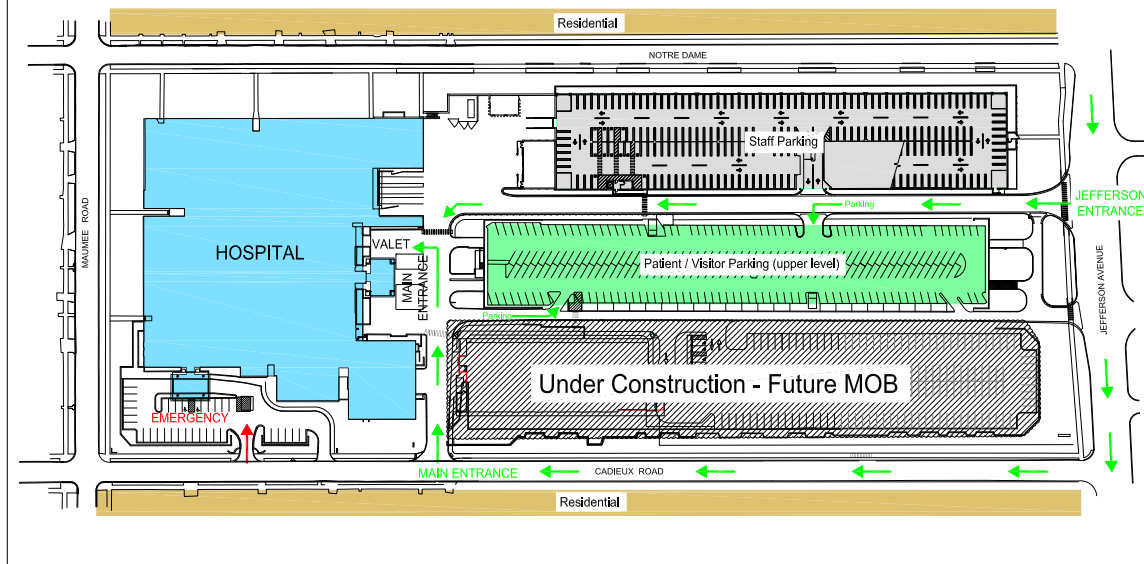
### Driving Directions:

From I-94, exit at Cadieux Road, drive south about four miles. Turn left into the main entrance.

From Jefferson Avenue, turn on Cadieux Road and travel about  $\frac{1}{8}$  mile to the main entrance.

From the Tunnel, take I-75 North to I-94 East to Cadieux. Go south on Cadieux Road for about four miles. Turn left into the main entrance.

From Metropolitan Airport, take I-94 East to Cadieux. Go south on Cadieux Road for about four miles. Turn left into the main entrance.



### Online map:

[www.beaumont.edu/patients-visitors/locations-maps-and-directions/beaumont-grosse-pointe-campus/](http://www.beaumont.edu/patients-visitors/locations-maps-and-directions/beaumont-grosse-pointe-campus/)

# Where to park at Royal Oak, Troy and Grosse Pointe

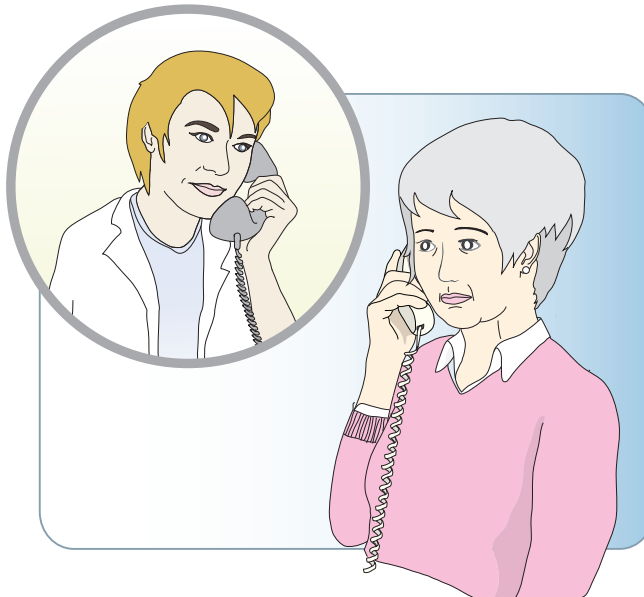
- Parking is free at all three Beaumont hospitals.
- Valet parking is also available for a fee.

## Where do family members and friends go?

Your family members and friends may wait with you in the surgical waiting room until you are called back into the pre-operative area. Free Wi-Fi is available for use.

## Cancelling your procedure

If you get a cold or other illness, or become pregnant, please call your surgeon's office as soon as possible. If you cannot reach your surgeon, please call the hospital. It may be necessary to reschedule your procedure.



# Medication tracking chart

We recommend keeping track of the medications you are taking using this chart.

<b>Medication name</b> What is the medicine called?	<b>Dose</b> How much do I take?	<b>Frequency</b> How often do I take it?	<b>Reason I'm taking</b> What is the medicine for?	<b>Take medicine with</b> Do I take it with food or water?

# Pain Diary

We recommend keeping track of your pain using this chart.

			Day of surgery	1 day after surgery	2 days after surgery	3 days after surgery	5 days after surgery	5 days after surgery
Side effects (yes or no)	Sleeplessness							
	Itchiness							
	Nausea							
	Dizziness							
	Constipation							
Pain level (0 to 10)	Morning	At rest						
		With activity						
	Noon	At rest						
		With activity						
	Night	At rest						
		With activity						

# Activity tracker

We recommend keeping track of both your incentive spirometer use and walking using the chart below. Both before and after surgery, you can keep track of your incentive spirometer use and you can also keep track of how often you walk.

Walking	
<b>Before surgery</b> Try and walk at least 15 minutes each day before surgery.	<b>After surgery</b> Try to walk at least 20 minutes 4 times each day beginning on the day after surgery.
Incentive Spirometer	
<b>Before surgery</b> Try and use your incentive spirometer 30 times each day before surgery.	<b>After surgery</b> Try to use your incentive spirometer 10 times per hour when awake beginning after surgery.

# Beaumont STTAR Clinic

If you are having surgery at the Royal Oak or Troy campuses, you may be asked to visit the Beaumont STTAR (Surgical Testing and Teaching for an Accelerated Recovery) Clinic before your surgery. You will be contacted by a Beaumont nurse if you need to set up an appointment to come to the STTAR clinic.

What to expect during the clinic visit:

- your medical and surgical history will be reviewed
- you will receive laboratory tests and diagnostics needed before your surgery
- you will receive education about your procedure and the Beaumont surgical experience
- you will receive a tour of the hospital.

**Your visit to the STTAR Clinic will last between 45-90 minutes.**

**My Beaumont STTAR Clinic Healthcare Provider is:**

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## Goals of surgery

It is important to set realistic goals for yourself before your surgery. It will be our priority to do everything we can to help make sure you achieve these goals. Please write down your goals of surgery here:

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## Notes

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on the right side, suggesting it's resting on a surface. There is no handwriting or other markings on the paper.

**Beaumont**