

ENHANCED RECOVERY AFTER SURGERY - ERAS PROGRAM



WHAT IS "MODERN BOWEL SURGERY"?

Bowel surgery in the modern era differs in many ways from bowel surgery in previous decades. If you or your family have had surgery in the past, you will notice that current care is different.

For example, new surgical and anaesthetic techniques have been developed to reduce the stress of surgery, to improve pain relief and to support your recovery. Oral bowel preparation (cleansing) is often not used. You will normally be allowed to eat and drink soon after surgery. You will move out of bed early after surgery.

These and other measures allow you to go home within days and more rapidly return to your usual activities

GETTING READY FOR YOUR RETURN HOME

- It is essential to start planning your discharge before you come to hospital.
- Consider what your needs will be when you return home (e.g. supplies, transport, support). Family and friends may be able to help. Support from your family and friends is important. The more you can inform them about your health and surgery, the more helpful they can be.

GETTING READY FOR HOSPITAL – Pre-admission Clinic

- The assessment is very important. You will be assessed by a multi-disciplinary team made up of anaesthetists, admission staff, ERAS co-ordinator, Colorectal care co-ordinator, stomal therapists, physiotherapists, dietitians and social workers. This will help us to plan your admission and discharge.
- You will drink a special carbohydrate drink called preOp to help your body prepare for surgery. You may also require some form of bowel preparation prior to your surgery. All the instructions will be provided to you at the Pre-admission Clinic.

YOUR HOSPITAL STAY

- You can start drinking fluids 4 hours after surgery. You will be encouraged to drink high-protein drinks to help build your strength after surgery. You will also be offered normal food soon after surgery when you are ready to eat.
- Effective pain relief is important to enable you to get out of bed and to take deep breaths and cough. You will have a push-button patient controlled pain relief device (PCA) and catheters delivering local anaesthetic inserted close to the operative site or epidurals to provide pain relief. You will also receive paracetamol four times a day.
- It is important you do not spend too much time lying down in bed. Standing up and sitting out of bed is encouraged, beginning 4 hours after your surgery. Hospital staff will also regularly encourage you to perform deep breathing and coughing exercise during the recovery period to help preventing lung problems such as pneumonia.
- Your safety is most important. It is safe for you to be discharged from hospital when you experience good pain relief with oral medication, are able to eat and drink, are passing wind / bowel motions regularly and there is no fever or other problems that require continued observation in hospital. Most patients will be ready for discharge 4 days after surgery. **Therefore, your expected length of stay is 4 days.**

AFTER YOUR DISCHARGE

- You will receive regular follow-up phone calls in the first week after your discharge from the ERAS co-ordinator or the Colorectal care co-ordinator to provide further advice and support as necessary.