Enhanced recovery programme: Thoracic surgery
Patient Diary

Information for patients
Thoracic Surgery
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What is enhanced recovery after surgery (ERAS)?

Enhanced recovery programmes (ERAS) aim to ensure that patients are in the optimal condition for their operation, anaesthesia and postoperative rehabilitation. Patients on ERAS have fewer complications, recover more quickly following surgery and get back to normal activities sooner.

Your active involvement before and after surgery is essential to your enhanced recovery.

This diary is to help you to record your daily goals after your surgery. It can be helpful for you to see how you are able to do a little more each day and for the nursing staff to check how you are getting on. It will help you to understand what to expect each day.

You are encouraged to read the information in this diary before you come into hospital. Please remember to bring it with you when you are admitted.

If you have any questions or concerns about any of the information or ERAS and your involvement, or if you need any help completing your diary please ask one of the nursing or medical team.

Smoking advice

If you smoke and are waiting for an operation it is very important that you stop smoking as soon as possible. Stopping smoking increases both your body’s ability to heal and your ability to recover from the anaesthetic. Smoking reduces the ability of your lungs to clear secretions, which can cause pneumonia, longer healing times and delayed recovery from anaesthetic. This may lead to complications, sometimes life-threatening, or increase the length of your stay in hospital, which in turn may lead to further complications.

Unfortunately many people don’t know that they are going to have surgery until they actually need it. Stopping smoking as early as possible
before your operation is best for your recovery and will help to reduce the risk of complications before, during and after your surgery.

You can get help to stop smoking from your local NHS stop smoking service or through your GP. Talk to your healthcare professional about which service is best for you, or for more information please visit the NHS Smokefree website:

- [https://www.nhs.uk/smokefree](https://www.nhs.uk/smokefree)

**Breathing exercises / chest clearance**

Breathing exercises are used to help re-expand your lungs after surgery. The exercises help to move secretions up your chest so you don’t have to cough as hard to clear it. The nurses and physiotherapists will help and encourage you to do these exercises early and regularly after your surgery.

Try to practice the techniques described below before you come into hospital so you are familiar with them.

**Deep breathing exercises** – to help re-expand your lungs after surgery. Take a deep breath in, hold for 5 seconds and breathe out. Repeat 5-10 times.

It is important to perform these regularly in the early days after your operation. This may be a little uncomfortable initially so do them little and often, roughly every hour. You will be encouraged to start these as soon as you wake up from the anaesthetic.

**Breathing control** – This is a breathing technique used to control breathlessness and is also useful for pacing yourself as your walking improves. It involves concentrating on breathing out. Stop and do 3-4 slow breaths all the way out when you feel breathless, and then breathe normally.

Repeat the above cycle until you feel your breathing is under control.
Some people find it hard to cough and, instead, prefer to ‘huff’. This is a sharp, fast, forced breath out after a medium breath in, rather like the breath you would take when trying to steam up a mirror.

After doing your deep breathing exercises, get in the habit of doing a ‘huff’ or a cough. This will help to make sure sputum is not building up in your chest.

It is easier to clear sputum after you have moved. Therefore you will be encouraged and assisted to sit out of bed and to start to walk early after your surgery.

**Activity**

It is important to continue to be active whilst you are in hospital. By being out of bed in a more upright position and by walking regularly, your breathing is improved. There is less chance of you developing a chest infection or clots in your legs. Your bowel movements usually return to normal sooner.

The nurses and physiotherapists will encourage and assist you to get out of bed early after your surgery, and assist you to begin walking. If you normally have difficulty walking or are unable to do so, we will advise you on other suitable exercises.

Please bring some loose fitting clothes to wear as we would like you to get dressed from day 2 after your operation.

**Pain management: during and after surgery**

We will work with you to keep you comfortable. It is important for you to be able to deep breathe, cough and move around. In order for us to manage your pain effectively, it is important that you tell us how well your pain relief is working so it can be adjusted if necessary.
The nurses will ask you to record your pain during the day. The following is the pain ‘score’ we use.

0 = no pain  1 = mild pain  2 = moderate pain  3 = severe pain.

We would like you to record your pain, both at rest and when moving.

There are a variety of ways we administer pain relief and the nurses and anaesthetist will discuss these options with you. As well as pain relief tablets the following methods will be discussed to decide which is the most appropriate one for you.

**Epidural**

An epidural is a very fine plastic tube inserted into your back while in theatre, either before or after you are put to sleep for the operation. You will then be given a continuous infusion of pain relieving medication that aims to numb the operation site. You will also be able to give yourself extra pain relief using a handset attached to the epidural pump.

You may have your epidural for 2-3 days and then move onto pain relief tablets once it is removed.

**Intravenous Patient Controlled Analgesia (PCA)**

PCA is a way of delivering pain relief medication – usually Morphine or Fentanyl – that is given through a small plastic tube in your vein. This is sited in your arm. This medication is delivered by a machine that has a button for you to press, allowing you to control the amount of pain relief that you receive. The nurses will show you how to use this. You cannot give yourself too much as the machine has a safety feature that switches off for 5 minutes between each dose.

You will normally have the PCA for 1-3 days after your operation and then move onto pain relief tablets.
Paravertebral Block (PVB)

A Paravertebral Block is a continuous infusion of local anesthetic around the nerves where your wound is. The local anaesthetic is administered through a thin flexible tube inserted into your back while you are in theatre. You will normally have the Paravertebral for 2-3 days. Usually, the PVB is used in combination with a PCA (see above).

Chest drains

After your surgery you may have one or two tubes in your chest to drain fluid and air that has collected around your lung following your operation. These are called chest drains. The drains will be attached to a plastic bottle that stands on the floor. It serves to collect any fluid that is drained and prevents air travelling back into your chest.

The nurses and doctors will monitor the drainage regularly and check to see if there is any air bubbling in the fluid. This bubbling is often referred to as an ‘air leak’. These observations will provide information as to the appropriate time for your chest drain to be removed. Removing your chest drain is a simple procedure and is carried out by the nursing staff on the ward.

In many cases your chest drain will be removed a few days after your operation. Sometimes, however, it is necessary for the drain to stay in for a more prolonged period to allow your lung to fully re-expand. If this is the case your drain may be transferred to a smaller bottle and you may be discharged home with this. If you go home with your drain, a district nurse will be arranged to visit daily to support you and your family and to check the drain and your wound. You will be given an appointment to attend the nurse-led drain clinic on Chesterman 3 for weekly review until it is the right time for your drain to be removed.
**Eating and drinking**

Good nutrition and adequate fluid intake are important. Try to eat a well-balanced diet while you are waiting to come into hospital and try to drink at least a litre of fluid a day.

It is important that you eat and drink soon after your operation. This helps to heal wounds, reduces the risk of infection, helps to prevent constipation and helps your overall recovery. You should not experience any nausea but if you do we will work with you to control this.

You should aim to have at least 5-6 cups to drink a day after your operation.

If you have any queries or concerns about any of the information you have read in this section, please speak to the Nurse or Doctor at your Pre-operative Assessment Clinic appointment.
Before your operation

At the Pre-operative Assessment Clinic (POAC)

At your POAC appointment, you may have a number of tests and investigations to determine your fitness for surgery and anaesthesia and your involvement in the ERAS. You will be seen by a doctor and a nurse and you will have the opportunity to discuss any queries or concerns you may have.

Planning your return home

Before you come into hospital give some thought as to how you will cope after discharge, as you may need practical as well as emotional support during the first few weeks at home.

During your POAC visit, we will discuss plans for your safe return home and the arrangements you will need to have in place. We will continue to assess your needs on discharge during your admission and work with you to ensure your safe return home.

Transport

As the criteria for hospital transport are restricted to those with specific mobility needs, you will need to make arrangements to be picked up by a relative or friend, on the day of discharge from hospital.

You will need to be collected from the ward before 10am. If this is not possible you will be asked to wait in the hospital discharge lounge.
Help at home

When you return home you will not be able to do any heavy lifting for the first 4-6 weeks so you may need help with shopping and cleaning. If no-one is going to be available to help with this, please let the nursing staff know as soon as you can.

You may need to visit your GP or practice nurse to have stitches removed. If you are unable to visit your GP Practice please let the nurses know and they will arrange a district nurse to visit you at home.

Medication

Please bring any medicines that you take to your POAC appointment and when you are admitted. If you have a list of your current medications from your GP please bring this with you. We will arrange for a supply of your medicines for you to take home when you are discharged. This is normally a two week supply and you will need to arrange to get further supplies from your GP after this.

Nutritional supplement drinks

You will be encouraged to drink nutritional supplements the night before and the morning of your operation. Each drink should be consumed within 20 minutes of starting so that we can ensure you have an empty stomach for at least 2 hours prior to your anaesthetic. Four cartons of these drinks may be given to you at your POAC appointment with clear instructions of when to take them at home. Patients on diabetes medications should not receive these drinks.

The evening before surgery please drink two cartons of these during the evening. On the morning of your operation, please drink the final two cartons at 6am.

You should not have any food or other drinks at all after midnight on the day of surgery unless you are specifically told you can.
Ticket to go

This is located on page 32 of this booklet.

It is a list of the goals you should aim for to be ready to go home. These will be discussed with you daily.

Please fill this in as you meet your goals.

Planned date of discharge: ________________________________

(Please complete on admission)
Coming into hospital

You will be admitted to hospital either on the morning of your surgery or the afternoon before. We will discuss this with you at the POAC.

You will be admitted to the Cardio-Thoracic Theatre Admission Unit (CTAU) or Chesterman 3 Ward.

You will return to Chesterman 3 after your operation.

Before surgery you will have the opportunity to discuss any concerns or issues that you are worried about. We will check that plans for going home are in place and that you understand your planned length of stay.

Please do not bring valuables into hospital with you. You may wish to bring a small amount of money to buy papers from the mobile trolley that visits the ward daily.
Day of surgery

When you wake from your operation:

- You should be comfortable and we will work with you to manage any pain you experience.
- You should not experience any nausea but if required we will work with you to manage this.
- You will have a small plastic tube in your arm through which fluids will be given.
- You will have 1 or 2 chest drains.
- You may have a catheter in your bladder to drain urine.
- You may have a Patient Controlled Analgesia, pain relief device; you will be shown how to use this.
- We will recommence your regular medication as soon as possible.
- You will be encouraged to have food and drink as soon as you are able. The nurses and doctor will advise you on this.
- If appropriate, you will be assisted to sit out of bed on the evening of surgery. We would like you to aim to sit out for 2 hours.

You should start your breathing exercises as soon as you are able to.
Day of surgery

Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ......................... Moving ..............................

Have you had any nausea? Yes / No

How many cups of fluid have you had? 1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?

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How many hours have you sat out of bed? 1 / 2

Breathing exercises (please circle):

2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you achieved your goals today? Yes / No

If not, what has made it difficult for you? (too tired, pain, etc)

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Planned date of discharge ................................................

Ticket to Go: Find this on page .................................
Day 1 after your operation

Managing your pain

We will work with you to manage your pain. We may remove the PCA today. We will give you additional pain relieving tablets. It is important that you let the nurses know if you are in pain.

Hygiene

You will be assisted to have a wash.

Eating and drinking

Continue to eat and drink as advised. Your intravenous infusion will be removed today if it is no longer required.

Activity / mobility

Continue with your breathing exercises every hour.

We would like you to sit out of bed for a total of 6 hours or more today. This can be broken down into smaller 2 hour periods if this is more comfortable.

You will be assisted to walk 30 meters on 3 occasions today.

Urine / bowels

The bladder catheter may be removed today.

Please let the nurses know if you have passed wind or had your bowels opened, as we need to monitor this following surgery.
Day 1 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest .................................. Moving ..................................

Have you had any nausea?  Yes  /  No

How many cups of fluid have you had?  1  /  2  /  3  /  4  /  5  /  6

What have you had to eat?
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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 30ms:  1  /  2  /  3

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes  /  No

Have you passed wind?  Yes  /  No

Have you had your bowels opened?  Yes  /  No

Have you achieved your goals today?  Yes  /  No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)
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Planned date of discharge ..........................................

Ticket to Go: Find this on page ..........................
Day 2 after your operation

Managing your pain

We may remove the PCA / Epidural / Paravertebral today. You will continue to receive regular pain relief tablets. Please tell the nurses if you are in pain. It is important to take regular pain medication so you can walk around, help care for yourself and do your breathing exercises.

Hygiene

You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking

Continue to eat and drink as you can tolerate. You should aim to drink at least 6 cups of fluid today.

Activity / mobility

We would like you to get dressed in your own clothes today.

Aim to sit out in your chair for a total of 8 hours. This may be broken down into short 2 hour periods.

You should aim to walk 40m or more on 3 occasions. The nurses and physiotherapist will assist you to do this.

Continue with your breathing exercises every hour.

The nurses will start to plan your discharge home in preparation for the next few days.
Day 2 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ........................................... Moving ..................................................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?
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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 40ms:  1 / 2 / 3

Breathing exercises (circle):   8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind? Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today? Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)
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Planned date of discharge ..................................................

Ticket to Go: Find this on page .............................
Day 3 after your operation

Managing your pain

If you still have an Epidural or Paravertebral these will be removed today. You will continue to receive regular pain relief medication. Please tell the nurses if you are in pain.

Hygiene

You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking

Continue to eat and drink as you can tolerate. You should aim to drink at least 6 cups of fluid today.

Activity / mobility

We would like you to get dressed in your own clothes today.

Aim to sit out in your chair for a total of 8 hours. This may be broken down into short 2 hour periods.

If you were able to walk easily before surgery, you should aim to walk 60m on 3 occasions during the day.

Continue with your breathing exercises every hour during the day.

Please ask your nurse for a discharge information sheet.

Please ask your nurse if your discharge medication has been ordered ready for when you go home.
Day 3 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ........................................ Moving ........................................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?

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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 60ms:  1 / 2 / 3

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind?  Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today?  Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)

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Planned date of discharge ...................................................

Ticket to Go: Find this on page ..........................
Day 4 after your operation

Managing your pain

You will continue to receive regular pain relief medication. Let the nurses know if you are in pain.

Hygiene

You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking

Continue to eat and drink as you are able.

Activity / mobility

We would like you to get dressed in your own clothes today.

Aim to sit out in your chair for a total of 8 hours with short rest periods on your bed during the day.

If you were able to walk easily before surgery, you should aim to walk 60m on at least 3 occasions during the day

Continue with your breathing exercises every hour during the day.

The nurses will continue to plan for your discharge in the next few days.

Please make sure you have discussed transport home and arrangements for the support you will need with your relatives and the nurses.
Day 4 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ........................................... Moving ...........................................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?

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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 60ms: 1 / 2 / 3

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind?  Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today?  Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)

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Planned date of discharge ...........................................

Ticket to Go: Find this on page ..........................
Day 5 after your operation

Managing your pain

You will continue to receive regular pain relief medication. Let the nurses know if you are in pain.

Hygiene

You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking

Continue to eat and drink as you are able.

Activity / mobility

We would like you to get dressed in your own clothes today.

Aim to sit out in your chair for a total of 8 hours with short rest periods on your bed during the day.

If you were able to walk easily before surgery, you should aim to walk 60m on at least 3 occasions during the day.

Continue with your breathing exercises every hour during the day.

The nurses will continue to plan for your discharge in the next few days.
**Day 5 - Your checklist to complete.**

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ............................... Moving ...............................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?

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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 60ms:  1 / 2 / 3 / 4

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind?  Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today?  Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)

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Planned date of discharge ..............................

Ticket to Go: Find this on page ......................
Day 6 after your operation (you may not need this page)

Managing your pain
You will continue to receive regular pain relief medication. Let the nurses know if you are in pain.

Hygiene
You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking
Continue to eat and drink as you are able.

Activity / mobility
We would like you to get dressed in your own clothes today.
Aim to sit out in your chair for a total of 8 hours with short rest periods on your bed during the day.
If you were able to walk easily before surgery, you should aim to walk 60m on at least 3 occasions during the day.
Continue with your breathing exercises every hour during the day.
The nurses will continue to plan for your discharge in the next few days.
Day 6 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ........................................ Moving ........................................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?

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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 30ms:  1 / 2 / 3 / 4

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind?  Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today?  Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)

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Planned date of discharge ...............................................

Ticket to Go: Find this on page ..........................
Day 7 after your operation (you may not need this page)

Managing your pain

You will continue to receive regular pain relief medication. Let the nurses know if you are in pain.

Hygiene

You will be encouraged to be more independent with your hygiene needs, but please ask for help if required.

Eating and drinking

Continue to eat and drink as you are able.

Activity / mobility

We would like you to get dressed in your own clothes today.

Aim to sit out in your chair for a total of 8 hours with short rest periods on your bed during the day.

If you were able to walk easily before surgery, you should aim to walk 60m on at least 3 occasions during the day.

Continue with your breathing exercises every hour during the day.

The nurses will continue to plan for your discharge in the next few days.
Day 7 - Your checklist to complete.

Pain score: 0 = no pain, 1 = mild pain, 2 = moderate pain, 3 = severe pain

My pain score: At rest ........................................... Moving ...........................................

Have you had any nausea?  Yes / No

How many cups of fluid have you had?  1 / 2 / 3 / 4 / 5 / 6

What have you had to eat?
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How many hours have you sat out of bed?  1 / 2 / 3 / 4 / 5 / 6 / 7 / 8

I have walked 60ms: 1 / 2 / 3

Breathing exercises (circle):  8am / 9am / 10am / 11am / 12am / 1pm / 2pm / 3pm / 4pm / 5pm / 6pm / 7pm / 8pm / 9pm / 10pm

Have you passed urine freely?  Yes / No

Have you passed wind?  Yes / No

Have you had your bowels opened?  Yes / No

Have you achieved your goals today?  Yes / No

If you have had difficulty achieving your goals, why? (too tired, pain, etc)
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Planned date of discharge .........................

Ticket to Go: Find this on page ......................
Going home

It is normal to feel tired and a little anxious when you first go home. Recovery can vary from 2-8 weeks, everyone is different. We have listed below general advice on the usual areas of care after thoracic surgery. Also we provide advice for discharge in the 'Video Assisted Thoracoscopy' and 'Thoracotomy' information booklets. If you have any concerns or questions regarding what you are able to do or any aspects of your care needs please discuss these with the nurses or doctors during your stay in hospital.

Please make sure the nurses have given you the contact number of the ward for you to ring for help or advice after you go home.

Moving around

Continue to move around regularly when you go home. Try to increase how far you walk each day. Try to include walks outside if you are able to and your general health allows you to do so.

Eating and drinking

Continue to try to drink 1 – 2 litres of fluid each day.

Continue to eat a well-balanced diet. You may find it easier to eat small more frequent meals until your appetite fully returns. If you need help or advice regarding your diet your GP will be able to arrange for a dietitian to advise you.

Pain management

Continue to take your pain relief medication regularly for the first week after discharge. It is a good idea to slowly reduce your pain relief medication over a period of time rather than stop it completely. Your GP will be able to advise you on this.
Your wound

If you have a choice of showering or having a bath, choose a shower for the first two weeks after surgery.

- Try not to use soap or perfumed products on your wound.
- Pat dry around and on your scar with a clean dry towel.

If you have to use a bath, we recommend the following:

- Do not soak for long periods for the first 6 weeks.
- Empty the water out before you get out.
- Place a non-slip mat in the bath.
- You may need assistance to get out of the bath.

Please complete the Patient Satisfaction Questionnaire at the end of this booklet before you go home.

Please leave this booklet with the nurses before you leave the ward.

Thank you for your active involvement and being a partner in your care.
Ticket to go:

This list of goals enables the nurses to work with you to plan your safe return home from hospital. Please tick each goal as you achieve it.

☐ I have a supply of my medications and understand how to take them.

☐ I have a copy of my discharge summary.

☐ My wound has been checked by a nurse today.

☐ If required, I have a letter for the district / practice nurse.

☐ I have no plastic tubes in my arms.

☐ Today I am able to: pass urine freely

☐ Have my bowels opened

☐ Walk around the ward independently

☐ Do the stairs if I need to

☐ Eat and drink normally.

☐ My pain is controlled and I am comfortable.

☐ I have my own transport home.

☐ I feel able to look after myself at home or have someone who will look after me.

☐ I have a discharge advice leaflet.

☐ I have received all the equipment and information I need from nursing staff and other specialist nurses / professionals.
I have been told if I need a follow up outpatient appointment and I am aware this will be sent to me in the post.

I have been given the telephone number for Chesterman 3 and know I can ring if I need help or advice

0114 271 4335  or  0114 271 4419
Patient satisfaction survey

Your views on your experience of the care and service we provide are important to us.

We would be grateful if you could spend a few minutes filling in this questionnaire. The information you provide will help us to evaluate and make improvements to our service.

Please be assured that any information you give will be kept strictly confidential.

Please tick the relevant box. There is space at the end of the survey for any other information or comments you may wish to add.

1. Were you involved as much as you wanted to be in decisions about your care?
   - Yes definitely
   - Yes, to some extent
   - No

2. Did you receive written information leaflets and a diary?
   - Yes
   - No

3. When were you given your diary?
   - At first consultant appointment.
   - At your Pre-operative assessment appointment
   - On ward
4. How much information about your condition and treatment was given to you?
- Not enough
- The right amount
- Too much

5. Were you informed about the following:

How long you would be in hospital?
- Yes
- No

When you would be up and about after your operation?
- Yes
- No

When you would be able to drink after your operation?
- Yes
- No

Why, how and when to do your breathing exercises?
- Yes
- No
6. Did you receive clear instructions on:

When to start fasting?

- Yes
- No

When to take your drinks before your operation?

- Yes
- No

7. Was the pain after your operation:

- Less than you expected
- The same as you expected
- Worse than you expected

8. Overall was your pain adequately controlled?

- Yes
- No

9. Do you have any comments about how your pain was managed?

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10. Did you feel involved in decisions about your discharge from hospital?

☐ Yes

☐ No

11. Were you given enough information regarding who to contact if you were worried about your condition or treatment after you left hospital?

☐ Yes

☐ No

12. Did you feel involved in decisions regarding your care?

☐ Yes

☐ Somewhat

☐ No

13. What did we do well?

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14. What can we do better?

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15. Was this patient diary useful to you?

☐ Yes
☐ No

Any other comments

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