

MR S T R BAILEY BSc Msc FRCS (Gen Surg)
Consultant General, Colorectal & Laparoscopic Surgeon

**Consulting at: Spire Tunbridge Wells Hospital, Maidstone &
Tunbridge Wells NHS Trust, Kent Institute of Medicine & Surgery
(KIMS) and BMI Somerfield Hospital Maidstone**

**PATIENT INFORMATION:
ENHANCED RECOVERY AFTER
SURGERY**

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Enhanced Recovery after Surgery

Enhanced recovery after surgery (ERAS) is a modern evidenced based method designed to help people recover more quickly, having had major surgery. The aims of enhanced recovery are to ensure that patients:

1. Are as healthy as possible before receiving treatment.
2. Receive the best possible care during their operation.
3. Receive the best possible care whilst recovering.

Having an operation can be very physically and emotionally stressful, so enhanced recovery programmes try to get the patient back to full health as quickly as possible. Research clearly demonstrates that the earlier a person gets out of bed and starts walking, eating and drinking after having had an operation, the shorter their recovery time will be. The enhanced recovery programme can be divided into three clear sections.

Pre Admission

Counselling - prior to your operation Mr Bailey will explain what the operation involves and you will have every opportunity to ask any questions or discuss any concerns that you have. You may be counselled by the Stoma Care Sisters, the Clinical Nurse Specialist, the Physiotherapist or the Occupational Therapy Team prior to your operation. This process is designed to ensure that you are as well informed about your condition and your operation as possible.

Fluid and Carbohydrate Loading - the night before your operation you will be given pre-operative drinks which contain essential vitamins and minerals and energy prior to your operation. You will also be given energy rich drinks two hours before your procedure to prevent prolonged fasting.

No or selective bowel preparation - we no longer use formal bowel preparation to ensure that the bowel has been completely cleared out prior to major bowel surgery. It may be necessary for you to receive a phosphate enema prior to your operation, but Mr Bailey will discuss this with you if it is necessary.

Informed consent – before the operation your permission to perform it will be sought by Mr Bailey, at this point you will have a final opportunity to ask any questions or make any requests that you feel are applicable for your care.

Intra operatively

During your operation we will endeavour to use the following techniques:

1. Short acting anaesthetic agents.
2. Epidural or regional analgesia to provide the best quality pain relief possible.
3. No drains.
4. Maintenance of normal body temperature throughout the operation.
5. Use of minimally invasive surgical techniques (laparoscopic surgery).

Post Operatively

On the day of surgery:

- You will have an epidural in your back for pain control.
- You will have a catheter placed into your bladder to help you pass urine.
- You will be encouraged to sit upright and perform deep breathing exercises immediately after the operation.

- You will be encouraged to drink clear fluids as soon as possible after the surgery; we will endeavour to control any feelings of nausea.

On the first day after surgery:

- The epidural and catheter will remain for your comfort.
- You will be mobilised out of bed and into the chair for most of the day and will be encouraged to take short walks with the assistance of the physiotherapist. The physiotherapist will also teach you static exercises to help reduce the risk of clots and breathing exercises to keep your chest clear.
- You will be encouraged to drink more fluids, including high energy drinks, soups, jelly, ice cream and so forth.

The second day after your operation:

- The epidural will be removed and approximately 6 hours later your catheter will be removed.
- Your pain relief will be in tablet or liquid form.
- You will be able to build to a light diet if you feel you are able to.
- Your mobilisation will continue with the Physiotherapist and your levels of activity should be increased.

The third day after your surgery:

- Your level of dependency should reduce and planning for your discharge will begin.

Discharge

Criteria for discharge are:

1. Your pain is well controlled.
2. You are eating and drinking without any nausea.
3. You have passed gas or had your bowels open.
4. You are passing urine normally.
5. You have adequate support at home.
6. You are confident to be discharged to the care of your next of kin.

After Discharge

Under no circumstances should you go home unless you are comfortable, confident and pain free. If when you return home, you should feel unwell or concerned for any reason, then you should not hesitate to contact the hospital from which you have been discharged or Mr Bailey's team. These details will be given to you prior to leaving the hospital. It is known that a small proportion of patients who have passed through the enhanced recovery process do need to come back into hospital, either for a simple review by the Medical Team or a short admission, however the vast majority do well and return to normal activities rapidly. The most important thing is that if you have any concerns, you must not hesitate to contact Mr Bailey or his team.