

## Patient Information and Daily Programme for Patients Having Liver Surgery:

### Open/Laparoscopic Wedge and Left Lateral Liver Resection

<b>Date of admission</b>	
<b>Date of surgery</b>	
<b>Expected Length of Stay in hospital</b>	We will aim for you to go home within <b>4-5 days</b> following your operation

**Please bring this diary with you when you come in to hospital.**

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## About your Programme/Diary

This leaflet is for patients having an open, laparoscopic wedge or liver resection. These operations are performed for benign (non-cancerous) and malignant (cancerous) disease.

This diary has been designed to help prepare and support you and your family/carers during your stay in hospital.

It outlines what should happen on each day. Sometimes there will be a specific reason why something isn't done but the team should explain this to you. If you have any concerns about what has or has not happened on any day, please let a member of the team know.

The diary advises on what you can do each day to help your recovery after surgery and get you home as soon as it is clinically safe. It is a good idea to start planning for when you go home **before** you come into hospital, so that your discharge is not unnecessarily delayed.

## Day of Operation (Day 0)

### Before coming to hospital

On the morning of surgery, try to drink as much of the **Nutricia preOp** drink as you can. **Finish** the drinks by **06:30** am if you are coming into hospital at 07:00 am or **11:00** am if you are coming into hospital at 11:00 am

### Coming into Hospital

Please go to the Admission Ward as advised on your admission letter. You will be checked in by a nurse and seen by members of the surgical and anaesthetic team before you are taken to theatre for your operation.

### After your operation

After your operation you will be taken to the surgical ward.

### Drips, Drains and Tubes

After your operation you will have several drips, drains and tubes in place:

**An intravenous (IV) drip** is used to give you fluids until you are able to drink normally.

**An abdominal drain** is a tube inserted near your abdominal (tummy) wound to help drain off fluid and prevent swelling.

**A urinary catheter** is a tube (catheter) put into the bladder to drain your urine into a collecting bag

### Reducing the risk of developing deep vein thrombosis (blood clots) – DVT Prophylaxis

You will wear TED stockings which help to maintain circulation in the leg and reduce the risk of blood clots forming (DVT – deep vein thrombosis). You will wear them for the whole of your hospital stay. You will also be given a daily injection of a blood thinning medicine (Clexane) which

you will need to carry on using for 28 days once discharged from hospital.

## **Pain Control**

It is important that your pain is well controlled so that you can

- walk about
- breathe deeply
- eat, drink and sleep well
- recover more quickly

**If at any time you feel your pain is not well controlled, it is important that you tell the nursing team.**

On the first few days after the operation, you will have your pain controlled by patient controlled analgesia (PCA) or an epidural. You will also be given regular paracetamol through a drip. Once the PCA / epidural is stopped, your pain will be controlled by medicine in liquid or tablet form.

## **Sickness**

If you feel sick (nausea) let the doctors or nurses know as there are medicines which can help.

## **Exercise**

Moving around as soon as possible after your operation will reduce your risk of developing a chest infection and blood clots and will help you recover from your operation more quickly.

- In bed keep the backrest raised at a slight angle
- Every hour you are awake do some gentle breathing and leg exercises as follows:
  - Cough 2 to 3 times

- Take 2 to 3 slow deep breaths to help keep your lungs clear
  - Flex your ankles by pointing your toes up towards the ceiling and then down towards the floor, then circle your feet in one direction and then the other
- The nurses will assist you to get out of bed and sit in a chair. Try to sit out in the chair for short periods in the morning and afternoon. Each day you should aim to spend longer periods of time in a chair than the previous day
- The nurses will assist you to gradually start walking. Build up the distance and time spent walking each day
- As well as building up your level of activity every day, you also need to have proper rest periods

## **Eating and Drinking**

It is important to eat and drink as your body needs fuel to repair. You can start eating and drinking as soon as you feel able after your operation.

Initially you might find it easier to eat little and often.

You may find that your sense of taste is altered and your appetite is less than normal after your operation. It can take several weeks for taste to return to normal.

## **Personal Care**

The nursing team will help you to wash yourself until you can manage on your own.

Try to wear your day clothes in hospital as this can help you stay more active and be positive about your recovery.

## **Review**

- A member of the surgical team will see you at least once a day
- If you or your family/carers need additional support or would like to talk to your Liver Cancer Nurse Specialist or the surgeons please speak to a member of staff
- If your family/carers would like to talk to the surgeons, please let the nurses know.

## **Daily Care**

- The next pages outline the routine for each day and include things that you should do to improve your post-surgery recovery.
- Sometimes there will be a specific reason why something isn't done but the team should explain this to you.

See page 4 for an explanation of drips and drains	Day of operation <b>Day 0</b>	First day after operation <b>Day 1</b>
<b>Monitoring (blood pressure, temperature, pulse, breathing)</b>	Hourly checks (or more if necessary) Heart monitor attached Oxygen given through a mask	2-4 hourly checks (min) Heart monitor removed
<b>Pain Control</b>	PCA or epidural in place IV Paracetamol through a drip	Pain control continues as before plus tablets or medicine
<b>DVT Prophylaxis</b>	TED stockings Clexane injection	TED stockings Clexane injection
<b>Abdominal Drain</b>	In place, review day 2	
<b>Urinary Catheter</b>	In place, review day 1	<b>REMOVED</b> , if appropriate
<b>Central Line</b>	In place, review day 1	<b>REMOVED</b> , if appropriate
<b>IV Fluids</b>	In place, review day 1	<b>STOPPED</b> , if appropriate
<b>Exercise</b>	In bed: - keep the head of the bed slightly raised - do your leg exercises - do your deep breathing exercises You'll be assisted to sit out in a chair for a short time	You'll be assisted to: - sit out in the chair for a brief time in the morning and afternoon - walk a short distance 2 – 4 times a day Continue your leg and breathing exercises hourly
<b>Eating and Drinking</b>	You can start drinking and eating as soon as you feel able	Try to eat and drink normally. You might prefer to eat little and often
<b>Wound Care</b>		Surgical wounds checked and dressings changed if necessary
<b>Personal Care</b>		You'll be assisted to wash yourself
<b>Investigations</b>	Blood tests	Blood Tests



	<b>Second Day after operation Day 2</b>	<b>Third Day after operation Day 3</b>	<b>Fourth to fifth Day after operation Days 4-5</b>
<b>Monitoring (blood pressure, temperature, pulse, breathing)</b>	4-6 hourly checks (min)	6 hourly checks	You will be discharged when you meet the criteria specified on the next page.
<b>Pain Control</b>	PCA / Epidural <b>REMOVED</b> Pain controlled with tablets or medicine	Continue pain control tablets or medicine	
<b>DVT Prophylaxis</b>	TED stockings Clexane injection	TED stockings Clexane injection	Continue injecting Clexane for 28 days once discharged
<b>Abdominal Drain</b>	<b>REMOVED</b> , if appropriate		
<b>Exercise</b>	Sit out in a chair in the morning and afternoon for a little longer than yesterday.  You should be able to walk without assistance. Try to walk further than yesterday  Continue your leg and breathing exercises	Sit out in a chair in the morning and afternoon for a little longer than yesterday.  Try to walk more often and further than yesterday.  Continue your leg and breathing exercises	Sit out in a chair in the morning and afternoon for a little longer than yesterday.  Try to walk more often and further than yesterday.  Continue your leg and breathing exercises
<b>Eating and Drinking</b>	You can eat and drink normally	You can eat and drink normally	You can eat and drink normally
<b>Wound Care</b>	If your wound is dry the dressing will be removed		
<b>Personal Care</b>	Try to dress in your day clothes	Dress in your day clothes	Dress in your day clothes

## **Fourth to Fifth Day after Operation (Days 4-5)**

### **You will be discharged today, if:**

- Your blood pressure, temperature, pulse and breathing are all stable
- Your test results are appropriate
- Your wounds are healing well
- Your pain is well managed
- You are able to walk
- You have someone to support you at home
- None of the team have concerns about your fitness

### **When you go home**

Check with the team to see if you need to be seen by your practice or district nurse.

If you had this operation to treat cancer, the cancer nurse specialist will ring you, normally within 7 days of discharge, to check on your recovery.

### **Surgical Follow Up Appointment**

Once discharged, you will receive an outpatient appointment. This appointment will normally be 4-6 weeks after discharge. If you don't receive an appointment please ring consultant secretary on 01752 432070 or 01752 432071

### **If you have any concerns or problems, please ring:**

Stonehouse Ward	01752 431488
Claire Downing, Cancer Nurse Specialist	01752 517905
Derriford Hospital Switchboard:	0845 155 8155

**Notes:**

**This leaflet is available in large print and  
other formats and languages.  
Contact: Patient Services  
Tel: 01752 437035**

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