

Having an operation

Patient information factsheet

The purpose of this factsheet

This factsheet contains important information to prepare you for your operation at the Whittington Hospital. All patients having routine surgery at the Whittington Hospital are admitted through the Day Treatment Centre. Please help us to achieve the best results for you by reading this information.

Preparing yourself for surgery

If you smoke, we strongly advise you to stop.

Stopping smoking reduces any risks associated with surgery and anaesthesia. We offer a Stop Smoking service which can be contacted on 0800 093 9030 or talk to the nurse at the Pre-assessment Clinic. They will be able to provide you with nicotine replacement therapy (NRT) before your admission to help with any cravings.

If you are overweight

Reducing your weight reduces any risks associated with an anaesthetic and surgery.

Long standing medical conditions

If you have a long-standing medical condition, the control of this is very important. You may be asked to see your GP or other specialists to see if changes in your treatment may be necessary.

Dental problems

If you have any loose teeth or caps or crowns, treatment from a dentist before your operation reduces the risk of your teeth being damaged during a general anaesthetic.

Postoperative wound infection

Please ensure you have bathed thoroughly before surgery. Good hand and personal hygiene reduces the risk of wound infection.

Please do not use a razor to shave the site where your operation will be, as this increases the risk of a wound infection.

What to bring with you to hospital

Please only bring essential items with you. Any valuables including money, jewellery and expensive electronic equipment are brought in at your own risk. The hospital is not liable should they go missing or become damaged.

Essential items:

- A warm dressing gown
- Indoor footwear/slippers
- Book or magazine
- All your pills and medicines (in the original containers)
- A small amount of money
- Any booklets/letters from the hospital about your operation

If you are staying in overnight, please also bring a wash bag, nightwear and loose, comfortable spare clothes.

Eating and drinking before your operation

For a safe anaesthetic, it is essential to follow instructions you have been given about eating and drinking before your operation.

If you have been asked to come to hospital between 7.00am and 10.30am

You can eat up until 2.00am in the morning, and we would encourage you to have a late night snack and drink. To avoid dehydration, please have a large drink of water at 6.00am on the morning of your surgery before coming to hospital. Do not have chewing gum or sweets after 6.00am.

Some patients will be given carbohydrate drinks, and these should be drunk by 6.00am.

If you are coming in at or after 11.00am

You can have breakfast, but you must finish eating before 7.30am in the morning. To avoid dehydration, please drink water freely until 11.00am. Do not have chewing gum or sweets after 11.00am.

After you arrive in hospital, depending on the exact timing of your operation, you may be offered further water to drink. Please ask the nurse looking after you about this.

If you have diabetes

We will try to ensure your fasting time is kept to a minimum. We will aim for you to be able to eat and drink soon after your operation. Please refer to the diabetes leaflet and information provided by the Pre-assessment Clinic about guidance for taking medication on the day of surgery. If you have any queries, please contact your diabetic nurse, or call 020 7288 3813/4.

For all patients

Please take your regular medicines unless instructed otherwise.

Please ensure you have someone to take you home if you are booked as day surgery. Please organise this in advance of the day of the operation. We advise a responsible adult should stay with you for the first 24 hours. If you live alone arrange for family or a friend to stay with you the night after your operation.

Transport home should be by car or taxi.



Arriving at the Day Treatment Centre

All patients should arrive at the reception of the Day Treatment Centre at the requested time. Due to limited space, anyone accompanying you will be asked to leave you here. If you have concerns about this, please talk to the nurse in the Pre-assessment Clinic.

A nominated family member (or friend) can call 020 7288 3813/4 for updates on your progress, and we will confirm a time to collect you after your operation.

Please note that the time on your appointment letter is the time you need to arrive at the unit and is not the time you will have your procedure.

At the Day Treatment Centre, you will see:

A nurse who will show you to a cubicle and will:

- Confirm your details (including your next of kin contact details) and attach an identity bracelet
- Measure your heart rate and blood pressure
- May measure your legs for a pair of TED (thromboembolic deterrent) surgical stockings to prevent blood clot formation
- May give you some additional tablets or medicine

Your anaesthetist, who will:

- Clarify and confirm details about your general health
- Review your test results
- Examine you
- Discuss with you the types of anaesthetic available and possible side-effects and how your pain will be managed after the operation. This may include giving you medications to control pain before the operation, with a drink of water.

Your surgeon, who will:

- Discuss the planned procedure/operation and ask for your consent for this to go ahead. Please make sure that you understand the procedure, and its risks and your other options before you sign the consent form. You have the right to refuse treatment at any point.
- Mark the site of your operation with a marker pen if indicated.

You may require an additional blood test on the morning of surgery.

Going to theatre

The exact time of your operation will be decided by the team caring for you on the day, and also depends on how long other procedures have taken. If it is likely you will be waiting for more than two hours, then we will ensure that you have more water to drink. Please help us avoid delays by:

- Removing body piercings and nail varnish
- Removing make-up
- Removing jewellery – a wedding band can be taped if required.
- Changing into the hospital gown provided, and removing underwear

It is important that you keep warm. Please wear your dressing gown over the hospital gown while waiting, and please wear this dressing gown and indoor shoes until you arrive in the anaesthetic room in theatres.

You will walk with a member of the nursing staff to the operating theatre.

When you enter the anaesthetic room there will be a trolley for you to lie on. The staff will perform a final identification check before monitoring equipment will be attached. These devices measure your heart rate, blood pressure, the oxygen levels in your blood, and the electrical activity of your heart. Oxygen will be given to you via a clear mask.

You can wear your glasses, hearing aids and dentures until you are in the anaesthetic room. You will be asked to remove these before your anaesthetic starts, so they are not damaged or dislodged.

For most people, the anaesthetist will insert an intravenous cannula (or “drip”) before your anaesthetic begins. This allows the anaesthetist to administer medications and fluids to you.

Recovering after your operation

Immediately after your operation you will be transferred to the recovery room, where you will be observed closely.

It is common to experience some mild side effects from anaesthetic at this time. These include:

- Tiredness, aches and pains
- Headache, dizziness, light-headedness
- Nausea and/or vomiting
- Sore throat and dry mouth

To minimise these you may receive anti-sickness medications and extra oxygen to breathe through a mask.

Pain is controlled in the immediate post-operative period by a combination of medications, some of which will have been given to you before or during your anaesthetic:

- Paracetamol
- Anti-inflammatory medications
- Weak opioids like codeine or tramadol
- Strong pain killers similar to morphine.
- Local anaesthetic is often given to numb the surgical incision site while you are still asleep, and you may have an area of numbness around the operation site, which may last for a few hours.

Your pain relief is very important for your recovery. If pain is well controlled the risks of developing complications after surgery are reduced. Pain is very different for everyone, but you should be able to take a deep breath, sit up and get out of bed if your pain is well controlled. If you are unable to do these things then please inform a member of staff.

Some medications can cause you to feel sleepy, feel sick or to vomit, and also cause itching of the skin. If this occurs, please let the nurse caring for you know.

There is further information regarding pain control for patients staying in on pages 7 and 8.

Going home after your operation

If you are going home on the day of your surgery, you will return to the Day Treatment Centre following your time in the recovery room, and be offered something to eat and drink. The time between waking from a general anaesthetic and being able to go home is usually between two and four hours, although it may be shorter or longer.

The nurse will perform a few final checks and provide you with advice about caring for your surgical wound, and give you any additional medication you will need during your recovery. They will contact your relative or friends to inform them you are ready to leave.

Rarely, your doctors might request that you stay in hospital overnight for further observation or treatment following your operation. We will arrange for you to have a bed in the hospital and will inform those accompanying you.

Looking after yourself after you leave the hospital

Pain medication is most effective when taken regularly and in combination. You will be given pain controlling medications to take home with you, which will be prescribed for you to take when required. However you should:

- Take paracetamol regularly for at least two days. If you remain in pain continue taking it regularly.
- Take Nurofen/Ibuprofen or codeine for at least the first 24 hours regularly.
- When you feel more comfortable after this time take these medications as and when you need them.
- It is important that you move around after your operation, and are able to take a deep breath in and out. Taking pain medication ensures that you are able to do this.

For your safety, we advise that in the first 24 hours after surgery you do not:

- Drive
- Work, operate machinery, use electrical equipment or tools
- Drink alcohol
- Sign legal documents i.e. cheques

Driving

Before you start driving again you should be free from the distracting effects of pain, or the sedative or other effects of any pain relief medication you are taking. You also need to be free of any physical restrictions due to your operation, be comfortable in the driving position and be able to safely control your car, including performing an emergency stop. Your insurance company should be informed of your operation (by you). Some companies will not insure drivers for a number of weeks after surgery, so it's important to check what your policy says as driving too soon may invalidate your insurance

If you are staying in after an operation

There is much evidence that patients leave hospital feeling better and leave sooner if they eat, drink, get out of bed and mobilise earlier. Being able to do these things early after an operation decreases the risks that arise from operations and anaesthetics. These include infections, especially chest infections, thrombosis (or blood clots) and delay in recovery of normal gut function.

Drinking: You should drink plenty of fluids. Ideally drips should be down as soon as possible.

Eating: You should eat as normally as you can. For some operations you may be prescribed supplemental drinks as it is not unusual to have a poor appetite.

Occasionally after operations you need to modify what you eat or drink, however if this is the case your surgical team – doctors and nurses – will advise you of this.

Usual medications: Take your usual medications again unless advised by the team looking after you. These will need to be prescribed if you are staying in. If you do not receive your usual medications please ask the surgical team why. Occasionally some medications need to be withheld.

Get out of bed: Aim to get out of bed, sit in a chair and walk around as soon as possible, again unless advised against this. If you feel unsteady please advise the nurse of this. You may need to see a physiotherapist after the operation to get help with getting up.

Pain control: You will have pain control medications prescribed, which will usually be given regularly, and you may have additional pain control methods as described below. These could be:

PCA or patient controlled analgesia: You press a button to give yourself pain relief. This is used in combination with other pain killers.

Epidural analgesia: Before an operation an epidural is inserted by the anaesthetist. Pain killers are given into the epidural, in addition to receiving pain killers by mouth. The epidural is usually continued after the operation to ensure good pain relief.

Spinal analgesia: Again, before an operation a spinal is inserted. This may be used alone as an anaesthetic or in combination with a general anaesthetic.

Local anaesthetic nerve block: This may be inserted before or during your anaesthetic

If you have pain which is not well controlled please tell the nurse or doctor caring for you.

If you have nausea or vomiting please tell the nurse looking after you, so that they can give you some anti-sickness medication. If you continue to feel sick after this has been given, please tell the nurse caring for you again.

You may also have oxygen, a catheter, drains and drips after an operation. These will be reviewed regularly by medical staff and will be removed as soon as possible.

Aim to eat, drink, get out of bed and mobilise as early as possible.

The first few days at home

Wound care: Slight redness and tenderness is normal for the first one to two weeks.

If you experience any of the following, please follow the contact advice listed on page 9:

- Excessive bleeding /fluid discharge from the wound
- Inflammation
- Pain
- Swelling

Removal of clips/stitches: Some stitches dissolve over a period of time and will not need to be removed. Other stitches/clips need to be removed after 10 to 14 days by the practice nurse at your GP surgery.

Deep Vein Thrombosis (DVT): DVT is the term used when a blood clot develops in the deep veins in the leg. Commonly this takes the form of a swollen calf, and can be dangerous. You may be asked to take blood thinning drugs in the form of injections or tablets after your operation to minimise the risk of this occurring.

Exercise: Try to keep yourself mobile as much as possible following your operation to minimise the risk of a DVT and chest infections.

Gradually build up your activity over the coming weeks to reach normal activity levels.

Returning to work

Your surgeon will advise you when you can return to work after your operation. If needed, you will be given a formal sick note.

Who to contact if you have concerns about your treatment

Concerns in the first 48 hours after surgery, Monday to Friday, 8am-10pm

Please contact the Day Treatment Centre, Tel: 020 7288 3813/4

Concerns in the first 48 hours after surgery, after 10pm and at weekends

Please contact the duty senior nurse via the Whittington Hospital switchboard, Tel. 020 7272 3070

For concerns 48 hours after surgery

Please contact your GP or practice nurse.

In an emergency

Ring 999 for an ambulance and return to hospital

Patient Advice and Liaison Service (PALS): PALS offers help, advice and support to patients, relatives and visitors, and are open Monday to Friday from 9.00am to 4.00pm and have an office on the ground floor of the hospital. They can be contacted on 020 7288 5551.

Mobile Phones: Areas where mobile phones can be used in the hospital will be signposted. There are areas in the hospital where mobile phones cannot be used because they interfere with sensitive equipment. Please show respect to others by using your phone quietly.

Car parking: Parking is limited at the Whittington Hospital site. The car park operates using number plate recognition with the first 20 minutes free for collection of patients. There are reserved parking bays immediately outside the Day Treatment Centre which may be used when you family/friends are collecting you. Otherwise car parks operate a pay on foot policy. You will collect a token on the way into the car park and pay at a pay machine before you can exit the car park.



Patient advice and liaison service (PALS)

If you have a question, compliment, comment or concern please contact our PALS team on 020 7288 5551 or whh-tr.whitthealthPALS@nhs.net.

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3081. We will try our best to meet your needs.

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