Your Hospital Care after Surgery

After your surgery, you will wake up in the Recovery Room. The nurse will check you often and give you pain medicine. When you are awake, you will be taken to your hospital room.

First Hours after Surgery

- Your family will be able to visit you when you are in your room.
- Your temperature, blood pressure, pulse and breathing rate will be checked often by the nursing staff. You may also have a clip on your finger that checks the amount of oxygen in your blood.
- Your nurse will check your dressing and the drainage from your incision.
- If you are not comfortable, let your nurse know.
- Tell your nurse right away if your incision swells or bleeds, or if you feel pain, numbness or tingling in your leg or arm.
- You may have oxygen and a heart monitor in place for a few hours.
- You may have a tube to drain urine from your bladder or other tubes to drain fluids. These tubes are most often removed before you go home. If the tubes are to be left in when you go home, you will be taught how to care for them.
- An EKG, chest x-ray or blood tests may be done.
- Your doctor will talk to you about your surgery.

IV (Intravenous) Fluids and Antibiotics

- You will receive fluids through an IV tube into your veins for a short time. The IV will stay in place until you are able to drink fluids well after your surgery. If you are getting medicine through the IV, you might have it in place for a longer time.
- You may receive antibiotics to prevent you from getting an infection.

Incision

- Your incision will be covered with a dressing. Your doctors and nurses will check your dressing and change it as needed. As the incision begins to heal, the dressing will get smaller.
• Your incision will be closed with sutures, staples or special tapes called steri-strips. These will be removed in 7 to 14 days on a follow-up visit to your doctor.

• Your nurse will teach you how to care for your incision.

Pain Control

• We will try to keep you comfortable. The nurse will ask you about your level of pain on a 0 to 10 scale, with 0 being no pain and 10 being the worst pain.

<table>
<thead>
<tr>
<th>Zero to Ten@ Scale (0 to 10) for rating pain.</th>
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<tbody>
<tr>
<td>0 1 2 3 4 5 6 7 8 9 10</td>
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No Pain Moderate Pain Worst Possible Pain


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Wong-Baker FACES Pain Rating Scale

<table>
<thead>
<tr>
<th>0</th>
<th>2</th>
<th>4</th>
<th>6</th>
<th>8</th>
<th>10</th>
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<tbody>
<tr>
<td>No Hurt</td>
<td>Hurts Little Bit</td>
<td>Hurts Little More</td>
<td>Hurts Even More</td>
<td>Hurts Whole Lot</td>
<td>Hurts Worst</td>
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• You can expect to have some pain at your incision site for several days after your surgery. You also may have some soreness in other parts of your body because of the way you were positioned during surgery.
Your doctor will order pain medicine for you. Be sure to let your nurse know when you have pain or need your medicine. Ask for pain medicine before your pain gets too bad. If your pain is not managed, your recovery will take longer. It often helps to take pain medicine before activity or before the pain gets too bad. If your pain gets worse or is not controlled with medicine, tell your nurse.

Activity

- **Do not** get up out of bed without help. Staff will tell you when it is safe to get up on your own.
- You will be helped to sit up on the side of your bed at first. Your activity will be increased to sitting up in a chair, then walking in the room, and then walking in the hallway. Each day the amount of time you are out of bed and the distance you walk should increase.
- Exercise your lungs by using an incentive spirometer to prevent problems after surgery. Coughing and deep breathing also help keep your lungs clear. Use a pillow or folded blanket across your abdomen or chest to protect any incisions there when you cough. It will let you cough better and help reduce pain. Do these exercises every 1 to 2 hours while you are awake.

**Blood Clots**

To help prevent the risk of blood clots:

- The staff will help you get out of bed and walk.
- The staff will show you how to do an exercise called ankle pumps to help move the blood in your legs. Do ankle pumps every hour while you are awake.
• You may have special stockings on your legs. Sometimes plastic wraps that connect to an air pump are used while you are in bed. They squeeze and relax around your legs to help your blood flow.
• You may be given injections of medicine in the abdomen to thin your blood.

Diet and Bowel Activity
• You may be given ice chips at first. If you do not have nausea, you will be given clear liquids then light foods. It may be a day or two after surgery before you get regular food.
• Tell the nurse if you have nausea.
• Surgery and pain medicine may cause constipation. The nurses will ask about your bowel activity. Stool softeners and laxatives may be given.

Getting Ready to Go Home
• Staff will teach you about your care at home and give you written instructions.
• Family and friends are encouraged to learn about your care so they can help you at home as needed. Someone should stay with you for 24 hours to 2 weeks after surgery based on the type of surgery you had.
• If you have no one that can stay with you, tell your doctor’s office before your surgery so that you can discuss options for your care after surgery. Some patients may need a short stay in a rehab facility after leaving the hospital.