

The ROYAL MARSDEN

NHS Foundation Trust

GEARS: Your post surgery recovery programme

*Retroperitoneal Lymph Node Dissection (RPLND)
patient checklist*



NHS

Name

Date of surgery

We understand that undertaking cancer surgery might be a stressful period. To alleviate some of the stress on your mind and body, we recommend following the GEARS programme.

GEARS stands for:



Get up



Eat



Analgesia








Remove








Speak up






Day before your surgery

Task	Completed
 <ul style="list-style-type: none">- Remain active throughout the day- Exercise at least once today to raise your heart rate	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Maintain your normal diet; no food after midnight- Drink carbohydrate preload drink – two sachets (one with your evening meal and one at bedtime)- Only drink water after midnight	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Continue regular medications as directed by your pre-assessment nurse	<input type="checkbox"/>
 <ul style="list-style-type: none">- Shower thoroughly as instructed by your pre-assessment nurse	<input type="checkbox"/>
 <ul style="list-style-type: none">- Call to check your arrival time and details- Plan details for your discharge to avoid delays	<input type="checkbox"/> <input type="checkbox"/>






Morning of surgery

Task	Completed
 <ul style="list-style-type: none">- Remain active until your surgery	<input type="checkbox"/>
 <ul style="list-style-type: none">- No food after midnight- Only drink water until 6am; nothing after 6am- Have your third preload drink finished by 6am	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Continue regular medications as directed by your pre-assessment nurse- Your team will give you pre-operative analgesia in the surgical unit before your surgery	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Have a shower before coming to hospital	<input type="checkbox"/>
 <ul style="list-style-type: none">- Ask any questions you have before your surgery- Plan details for your discharge to avoid delays	<input type="checkbox"/> <input type="checkbox"/>






Immediately after your surgery

Task	Completed
 <ul style="list-style-type: none">- Deep breathing exercises throughout the day	<input type="checkbox"/>
 <ul style="list-style-type: none">- Drink sips of water; progress to clear fluids if tolerating- Have chewing gum/boiled sweets, if possible, when sufficiently awake	<input type="checkbox"/>
 <ul style="list-style-type: none">- Learn to use Patient Controlled Analgesia (PCA)- Make your team aware if you are in pain	<input type="checkbox"/>
 <ul style="list-style-type: none">- No actions required today	<input type="checkbox"/>
 <ul style="list-style-type: none">- Raise any questions or concerns to your team	<input type="checkbox"/>






Day 1 after your surgery

Task	Completed
 <ul style="list-style-type: none">- Deep breathing exercises throughout the day- Sit out of bed twice for one hour- Walk 100 metres if tolerated	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Drink normally as tolerated- Try a soft diet if instructed by team- Have chewing gum or boiled sweets three times a day	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Make your team aware if you are in pain- Pain team will see you to optimise your pain relief- Stop PCA at 8am ward round, and start regular oral analgesia and laxatives	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Your team will remove your urinary catheter at 6am- Your team will aim to remove your central venous line and arterial line	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Raise any questions or concerns to your team- Continue planning your discharge (refer to SAFER discharge checklist on page 13)	<input type="checkbox"/> <input type="checkbox"/>






Day 2 after your surgery

Task	Completed
 <ul style="list-style-type: none">- Deep breathing exercises throughout the day- Sit out of bed twice for three hours- Walk 200 metres twice in the day	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Drink normally as tolerated- Progress from a soft diet to a light diet as tolerated- Have chewing gum or boiled sweets three times a day	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Make your team aware if you are in pain- Pain team will see you if needed- Stop PCA	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Your team will remove your urinary catheter if not already removed- Your team will remove your central venous line and arterial line if possible and not already removed	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Raise any questions or concerns to your team- Learn how to administer Tinzaparin injection- Continue planning your discharge (refer to SAFER discharge checklist on page 13)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Day 3 after your surgery

Task	Completed
 <ul style="list-style-type: none">- Sit out of bed most of the day- Wear your own clothes- Walk 400 metres three times in the day	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Drink normally- Eat a light diet as tolerated- Have chewing gum or boiled sweets three times a day	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Make your team aware if you are in pain- Your team will ensure your discharge medications are ready	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Some of your intravenous lines will be removed if not needed	<input type="checkbox"/>
 <ul style="list-style-type: none">- Raise any questions or concerns to your team- Your team may consider discharge today if SAFER discharge checklist achieved (see page 13)- Ensure you are confident with your tinzaparin injection administration and learn how to care for your wounds	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Day 4 after your surgery

Task	Completed
 <ul style="list-style-type: none">- Dress and mobilise freely in preparation for discharge	<input type="checkbox"/>
 <ul style="list-style-type: none">- Progress to a normal diet as tolerated	<input type="checkbox"/>
 <ul style="list-style-type: none">- Stop pregabalin before discharge- You will have all of your medications explained to you before discharge	<input type="checkbox"/> <input type="checkbox"/>
 <ul style="list-style-type: none">- Your team will remove all intravenous cannulas	<input type="checkbox"/>
 <ul style="list-style-type: none">- Raise any questions or concerns to your team- Discharge home – SAFER discharge checklist achieved (see page 13)	<input type="checkbox"/> <input type="checkbox"/>

Frequently asked questions

When can I start driving?

You can drive as soon as you are off strong painkillers and can confidently perform an emergency stop, if in doubt please contact your insurer.

When is my next appointment?

Your discharge summary will include information on follow up appointments, duration of discharge medication and who to contact if you have questions.

How long do I continue injecting myself with Tinzaparin?

Most patients continue to use the Tinzaparin injections for 28 days post-operatively. A small group of patients will be specifically directed to use the injections for longer for clinical reasons. The team will discuss this with you directly.

If you would like a refresher on how to self-inject your Tinzaparin go to the Patient Procedures Portal at <https://patients.royalmarsden.nhs.uk>

Basic wound care

- Keep wounds clean and dry
- Cleanse in the shower
- Gently dry with a clean towel
- Avoid using soap on the wound
- Unless oozing or rubbing on clothing keep wounds exposed to allow them to heal.

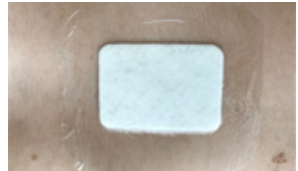
You may have skin clips or stitches. These are usually taken out between 10-14 days after surgery. Your team will give you detailed instructions and will make sure you know where to go to get this done before you leave hospital. This is sometimes done at your local GP practice.



Surgical skin clips



Removable stitches



Tegaderm dressing

SAFER Clinical Criteria for Discharge (CCD)

1. Mobilising freely; eating and drinking adequately
2. Pain well controlled with oral analgesia
3. Independent with care for wounds and dressings, or District Nurse arranged
4. Self-administering Tinzaparin injections
5. All lines/drains removed; or plan for removal as outpatient
6. All concerns addressed, contact details given, follow up arranged

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This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from: The Royal Marsden Help Centre
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AD-1752-Retroperitoneal Lymph Node Dissection

Contact details

It is **very important** that if you have any concerns or problems after leaving hospital, you contact someone as soon as possible.

Your key worker:

The Royal Marsden Macmillan Hotline

020 8915 6899 (available 24 hours a day, seven days a week)

Other useful sources of patient information:

Macmillan Cancer Support

www.macmillan.org.uk

0808 808 0000 (free phone)

Macmillan provides information and support on cancer from diagnosis to treatment and beyond. A wide range of resources are also offered.

Cancer Research UK

www.cancerresearchuk.org

CRUK has a patient information website, with information on all types of cancer and treatment choices.



Radiation and
Chemotherapy Services
Preston & Poulton