






DAY	-1	0	1	2	3	4
DATE	___/___/___	OPERATION	___/___/___	___/___/___	___/___/___	DISCHARGE
	Be active Exercise to raise heart rate	Deep breathing	Deep breathing		Sit out in own clothes	Freely mobilise
			Sit: 2 x 1 hour	2 x 3 hours		
			Walk: 1 x 100m if ok	2 x 200 metres	3 x 400 metres	
	Carbohydrate (CHO) pre-load drink x 2 Clear fluid from 00:00	06:00 - 1 x pre-load Post-op - Sips -> free fluids	Free fluids		Light diet as tolerated	
		Start Soft diet	Soft diet -> Light diet			
		Chewing Gum/ Boiled Sweets (3 x 20 mins/day)				
	Continue regular meds unless advised	Spinal + RS block PCA, Paracetamol	Pain team review			
			PCA down at 8am Start oral dihydrocodeine +/- NSAID, oramorph, laxido	PCA down if not previously	Optimise analgesia Prepare TTOs	
	Shower well before coming to hospital	NGT out end of case Aim for no drains	Remove catheter 6am Aim to remove CVC	Urinary catheter out if not previously	Remove iv cannula	
	Call to check arrival time	Start discharge planning – refer to SAFER CCD		Learn how to do Tinzaparin injections	Aim for discharge if SAFER CCD achieved	Prepare to go home - SAFER CCD achieved
		Voice any questions at any time to your team				

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