## The ROYAL MARSDEN

NHS Foundation Trust

# **GEARS: Your post surgery** recovery programme

Transoral Robotic Oropharyngeal Resection (TORS) patient checklist





Name			
Date of st	ırgery		

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



 $\mathbf{E}_{\mathsf{at}}$ 



 $\mathbf{A}_{ ext{nalgesia}}$ 



 $R_{
m emove}$ 



Speak up

# Day before your surgery

Task		Completed
	<ul><li>Remain active throughout the day</li><li>Exercise at least once today to raise your heart rate</li></ul>	
<b>(6)</b>	<ul> <li>Maintain your normal diet; no food after midnight</li> <li>Drink carbohydrate preload drink – two sachets (one with your evening meal and one at bedtime)</li> <li>Only drink water after midnight</li> </ul>	
	Continue regular medications as directed by your pre-assessment nurse	
	<ul> <li>Shower thoroughly as instructed by your pre-assessment nurse</li> </ul>	
	<ul><li>Call to check your arrival time and details</li><li>Plan details for your discharge to avoid delays</li></ul>	

# **Morning of surgery**

Task		Completed
	- Remain active until your surgery	
	<ul><li>No food after midnight</li><li>Only drink water until 6am; nothing after 6am</li><li>Have your third preload drink finished by 6am</li></ul>	
	<ul> <li>Continue regular medications as directed by your pre-assessment nurse</li> <li>Your team will give you pre-operative analgesia in the surgical unit before your surgery</li> </ul>	
	– Have a shower before coming to hospital	
	<ul><li>Ask any questions you have before your surgery</li><li>Plan details for your discharge to avoid delays</li></ul>	

## **Immediately after your surgery**

Task		Completed
	– Deep breathing exercises throughout the day	
<b>(6)</b>	– Nil by mouth	
	<ul><li>Learn to use your Patient Controlled Analgesia (PCA)</li><li>Make your team aware if you are in pain</li></ul>	
	– No actions required today	
	– Raise any questions or concerns to your team	

# Day 1 after your surgery

Task		Completed
	<ul><li>Deep breathing exercises throughout the day</li><li>Sit out of bed twice for three hours</li><li>Walk 200 metres twice in the day</li></ul>	
	<ul> <li>Begin feeding via the nasogastric tube as tolerated to supplement oral intake until normal diet is resumed</li> <li>Speech and Language Therapy (SLT) review to assess swallowing</li> <li>Try a soft diet as directed</li> <li>Drink water as directed</li> </ul>	
	<ul><li>Make your team aware if you are in pain</li><li>Pain team will see you to optimise your pain relief</li></ul>	
	<ul> <li>Your team will remove your urinary catheter if you are mobilising</li> <li>Your neck drain will be removed when output is &lt;30mls/24 hours</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Tracheostomy cuff down +/- speaking valve</li> <li>Continue planning your discharge (refer to SAFER discharge checklist see page 14)</li> </ul>	

# Days 2–3 after your surgery

Task		Completed
	<ul><li>Deep breathing exercises throughout the day</li><li>Sit out of bed for most of day</li><li>Walk 400 metres twice in the day</li></ul>	
<b>(</b>	<ul> <li>SLT review to guide progression of eating and drinking</li> </ul>	
	<ul><li>Make your team aware if you are in pain</li><li>Pain team will see you to optimise your pain relief</li><li>Stop PCA and start regular oral or nasogastric analgesia</li></ul>	
	<ul> <li>Your team will remove your urinary catheter when you are mobilising</li> <li>Your team will remove your neck drain when output is &lt;30mls/24 hours</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Your team will fit your tracheostomy with a Heat and Moisture Exchange (HME) valve/speaking valve</li> <li>Continue discharge planning (refer to SAFER discharge checklist see page 14)</li> </ul>	

# Day 4 after your surgery

Task		Completed
	<ul> <li>Sit out of bed most of the day</li> <li>Wear your own clothes</li> <li>Mobilise freely</li> <li>Swallowing rehabilitation exercises throughout the day</li> </ul>	
<b>(6)</b>	<ul> <li>SLT review to guide progression of eating and drinking</li> </ul>	
	<ul><li>Make your team aware if you are in pain</li><li>Pain team will see you if required</li><li>Your team will aim to reduce your pregabalin dose</li></ul>	
	<ul> <li>Your team will remove your nasogastric tube if oral intake is deemed sufficient by dietician</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Continue planning your discharge (refer to SAFER discharge checklist on page 14)</li> </ul>	

# Day 5 after your surgery

Task		Completed
	<ul> <li>Sit out of bed most of the day</li> <li>Wear your own clothes</li> <li>Mobilise freely</li> <li>Swallowing rehabilitation exercises throughout the day</li> </ul>	
<b>(6)</b>	<ul><li>SLT review to guide progression of eating and drinking</li><li>Progress to soft diet as directed</li></ul>	
	<ul><li>Make your team aware if you are in pain</li><li>Pain team will see you if required</li><li>Pregabalin will be stopped today</li></ul>	
	– Your team will remove your flap drain when output is <30mls/24 hours	S
	<ul> <li>Raise any questions or concerns to your team</li> <li>Continue planning your discharge (refer to SAFER discharge checklist see page 14)</li> </ul>	

# Days 6–7 after your surgery

Task		Completed
	<ul> <li>Sit out of bed most of the day</li> <li>Wear your own clothes</li> <li>Mobilise freely</li> <li>Swallowing rehabilitation exercises throughout the day</li> </ul>	
<b>(6)</b>	<ul><li>SLT review to guide progression of eating and drinking</li><li>Water and soft diet as directed</li></ul>	
	<ul><li>Oral analgesia</li><li>Make your team aware if you are in pain</li><li>Your team will prepare your discharge medications</li></ul>	
	<ul> <li>Your team will remove your flap drain when output is &lt;30mls/24 hours, if not already</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Continue planning your discharge (refer to SAFER discharge checklist see page 14)</li> </ul>	

# Days 8–10 after your surgery

Task		Completed
	<ul> <li>Sit out of bed most of the day</li> <li>Wear your own clothes</li> <li>Mobilise freely</li> <li>Swallowing rehabilitation exercises throughout the day</li> </ul>	
	<ul> <li>SLT review to guide progression of eating and drinking</li> <li>Your team will consider arranging for insertion of a RIG/ PEG to aid feeding if your swallow/intake are insufficient</li> </ul>	
	<ul><li>Make your team aware if you are in pain</li><li>Your team will continue to prepare your discharge medication</li></ul>	
	<ul> <li>If you have a tracheostomy tube your team will remove it (decannulation) when you are ready</li> <li>Your team will remove unused intravenous cannulas</li> <li>Have a shower</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Learn how to care for your wounds</li> <li>Continue planning your discharge (refer to SAFER discharge checklist see page 14)</li> </ul>	

# Days 11–14 after your surgery

Task		Completed
	<ul> <li>Dress and mobilise freely in preparation for your discharge</li> <li>Swallowing rehabilitation exercises throughout the day</li> </ul>	
	<ul> <li>SLT review to guide progression of eating and drinking</li> <li>If you have a RIG/PEG/NG for feeding you will learn how to use it, and nutritional supplements will be given to you for discharge</li> </ul>	
	<ul> <li>Make your team aware if you are in pain</li> <li>Your team will ensure your discharge medications are ready</li> <li>You will have all of your medications explained to you before discharge</li> </ul>	
	– Your team will remove all intravenous cannulas	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Discharge home – SAFER discharge checklist achieved (see page 14)</li> </ul>	

## 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.

# SAFER Clinical Criteria for Discharge (CCD)

- Mobilising freely
- 2. Adequate nutritional intake either orally or via enteral route
- 3. Pain well controlled with oral or enteral analgesia
- 4. Independent with care for wounds and dressings, or District Nurse arranged
- 5. All lines / drains removed; or plan for removal as outpatient
- 6. RIG/PEG training completed if required
- 7. All concerns addressed, contact details given, follow up arranged.

## **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. You are likely to have everything removed before discharge but if not, 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

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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

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## **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







