The ROYAL MARSDEN NHS Foundation Trust

GEARS: Your post surgery recovery programme

Head and Neck surgery with free flap reconstruction patient checklist





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:



Day before your surgery

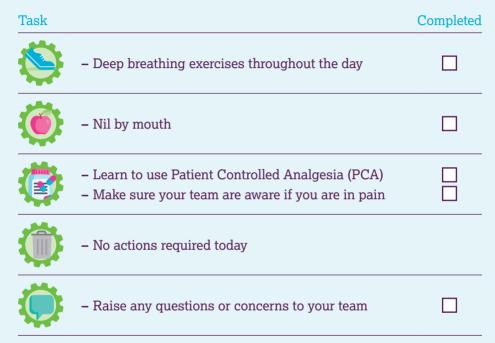
Task		Completed
	Remain active throughout the dayExercise at least once today to raise your heart rate	
۲	 Maintain your normal diet; no food after midnight Drink carbohydrate preload drink – two sachets (one with your evening meal and one at bedtime) Only drink water after midnight 	
٢	 Continue regular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

Morning of surgery

Task		Completed
	– Remain active until your surgery	
	– No food after midnight – Only drink water until 6am; nothing after 6am – Have your third preload drink finished by 6am	
	 Continue regular medications as directed by your pre-assessment nurse 	
	– Have a shower before coming to hospital	
	 Ask any questions you have before your surgery Plan details for your discharge to avoid delays 	

Immediately after your surgery (if awake*)

*You may be kept asleep overnight following your surgery – if not, follow the steps below



Day 1 after your surgery

Task		Completed
	 Deep breathing exercises throughout the day Sit out of bed twice for an hour Walk a short distance with the help of physiotherapy/nursing staff if possible 	
	 Speech and Language Therapy (SLT) will assess your swallowing and direct a gradual increase in ora intake, starting with sips of water 	1
	 If you had a nasogastric tube placed during surgery, this will be removed once oral intake is adequate 	
	– Make your team aware if you are in pain – Pain team will see you to optimise your pain relief	
	 If you have been kept asleep overnight then you will be gradually woken and your team will remove your breathing tube early in the morning 	
	 Your team will remove your urinary catheter and help you to mobilise in the afternoon 	
	 Raise any questions or concerns to your team Continue planning your discharge (refer to SAFER discharge checklist on page 14) 	

Day 2 after your surgery

Task		Completed
	 Deep breathing exercises throughout the day Sit out of bed twice for three hours Walk 60 metres twice in the day 	
	 SLT and surgeons review to guide progression of eating and drinking 	
٢	 Make your team aware if you are in pain Pain team will see you to optimise your pain relief Stop PCA and start regular oral analgesia and laxatives as directed 	
٢	 Your team will remove your neck drain when output is <30ml/24 hours 	
	 Raise any questions or concerns to your team Continue planning your discharge (refer to SAFER discharge checklist on page 14) 	

Day 3 after your surgery

Task		Completed
	 Deep breathing exercises throughout the day Sit out of bed most of the day Walk 200 metres twice in the day 	
	 SLT and Surgeon review to guide progression of eating and drinking 	
٢	 Make your team aware if you are in pain Pain team will see you to optimise your pain relief Stop your PCA and start regular oral analgesia and laxatives as directed 	
	 Your team will remove your central venous catheter (CVC) if not needed 	
	 Raise any questions or concerns to your team Continue planning your discharge (refer to SAFER discharge checklist on page 14) 	

Day 4 after your surgery

Task		Completed
	 Deep breathing exercises throughout the day Sit out of bed most of the day Walk 200 metres twice in the day 	
	 SLT and Surgeons review to guide progression of eating and drinking 	
	 Make your team aware if you are in pain Pain team will see you to optimise your pain relief if required 	
	 Your team will remove your flap drain when output is <30ml/24 hours 	
	 Raise any questions or concerns to your team Continue planning your discharge 	

Day 5 after your surgery

Task		Completed
	– Mobilise freely – Stay out of bed for most of the day – Wear your own clothes	
۲	 SLT and Surgeons review to guide progression of eating and drinking 	
	Make your team aware if you are in painYour team will prepare your discharge medications	
	 Your team will remove your flap drain when output is <30ml/24 hours 	
	 Raise any questions or concerns to your team Learn how to care for your wounds Continue planning your discharge (refer to SAFER discharge checklist on page 14) 	

Day 6 after your surgery

Task		Completed
	– Mobilise freely – Stay out of bed for most of the day – Wear your own clothes	
	 SLT and Surgeons review to guide progression of eating and drinking 	
	 Your team will ensure your discharge medications are ready 	
	– Have a shower – Your team will remove any unused cannulas	
	 Raise any questions or concerns to your team Ensure you are confident with wound care Your team may consider discharge today if SAFER discharge checklist is achieved (see page 14) 	

Day 7 after your surgery

Task		Completed
	– Dress and mobilise freely in preparation for your discharge	
	 SLT and Surgeons review to guide progression of eating and drinking 	
	 You will have all of your medications explained to you before discharge 	
	– Your team will remove all cannulas	
	 Raise any questions or concerns with your team Discharge home – SAFER discharge checklist achieved (see page 14) 	

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)

- 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. All lines/drains removed; or plan for removal as outpatient
- 5. 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. 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 from: The Royal Marsden Help Centre Freephone: 0800 783 7176 Email: patientcentre@rmh.nhs.uk

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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.

