The ROYAL MARSDEN NHS Foundation Trust

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

Open Total Abdominal Hysterectomy and Bilateral Salpingo-oophorectomy +/- Omentectomy patient checklist





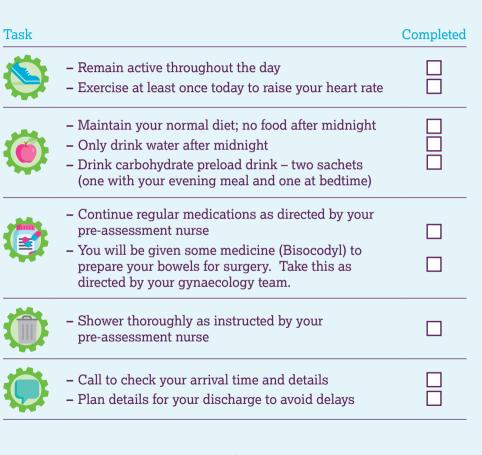


We understand that undertaking cancer surgery might be a stressful period. To alleviate some of the stress on your mind and body, we recommend following the GEARS programme.

GEARS stands for:



## Day before your surgery



# Morning of surgery

Task		Completed
	– Deep breathing exercises throughout the day	
	– Only drink water until 6am – No food after midnight – Have your third preload drink finished by 6am	
	<ul> <li>Continue regular medications as directed by your pre-assessment</li> <li>When you arrive in hospital you will be given an enema as further preparation before surgery</li> </ul>	
	– Have a shower before coming to hospital	
	<ul> <li>Ask any questions you have before your surgery</li> <li>Continue planning details for your discharge (refer to SAFER discharge checklist on page 12)</li> </ul>	

# **Immediately after your surgery**

Task		Completed	Task	
	– Deep breathing exercises throughout the day			– Deep b – Sit out – Walk 2
۲	<ul> <li>Drink sips of water; progress to clear fluids if tolerating</li> <li>Chewing gum/boiled sweets three times a day for 20 minutes</li> </ul>		(Ö)	– Drink r – Start a – Have cl
	<ul> <li>Learn to use your Patient Controlled Analgesia (PCA)</li> <li>You will be started on oral analgesia when you are awake after your operation</li> </ul>			– Your te laxative help yo – Make y
	<ul><li>Tell your team if you are in pain</li><li>No actions required today</li></ul>			– Stop P( morphi – Your te
	<ul> <li>Raise any questions or concerns to your team</li> <li>Continue planning details for your discharge (refer to SAFER discharge checklist on page 12)</li> </ul>		٢	in the r – Your te used in – Have a
				– Raise a – Continu

# Day 1 after your surgery

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Fask		Completed
	<ul> <li>Deep breathing throughout the day</li> <li>Sit out of bed twice for 2 hours</li> <li>Walk 200m twice</li> </ul>	
	<ul> <li>Drink normally as tolerated</li> <li>Start a soft diet as instructed by team</li> <li>Have chewing gum or boiled sweets three times a day</li> <li>Your team will prescribe you sodium docusate (a laxative), and peppermint water to have regularly to help your bowels return to normal</li> </ul>	
	<ul> <li>Make your team aware if you are in pain</li> <li>Stop PCA at 8am ward round, and start oral morphine when required</li> </ul>	
	<ul> <li>Your team will aim to remove your urinary catheter in the morning</li> <li>Your team will aim to remove your central line (if used in theatre)</li> <li>Have a shower</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 12)</li> </ul>	
	7	

# Day 2 after your surgery

Task		Completed
	<ul><li>Mobilise freely</li><li>Stay out of bed for most of the day</li><li>Wear your own clothes</li></ul>	
	<ul> <li>Drink normally as tolerated</li> <li>Try a light diet as instructed by your team</li> <li>Chewing gum/boiled sweets three times a day for 20 minutes</li> </ul>	
	<ul><li>The pain team will see you if required</li><li>Stop PCA, if not already</li></ul>	
	<ul> <li>Your team will remove your urinary catheter if not already removed</li> <li>Your team will remove your intravenous cannula once all of your drains have been safely removed</li> </ul>	
	<ul> <li>Raise any questions or concerns to your team</li> <li>Learn how to care for your wounds</li> <li>Learn how to administer Tinzaparin injections</li> <li>Continue planning your discharge (refer to SAFER discharge checklist on page 12)</li> </ul>	

# Day 3 after your surgery

Task		Completed
	<ul><li>Mobilise freely</li><li>Stay out of bed most of the day</li><li>Wear your own clothes</li></ul>	
	<ul> <li>Drink normally as tolerated</li> <li>Eat a normal diet as tolerated</li> <li>Chewing gum/boiled sweets three times a day for 20 minutes</li> </ul>	
٢	<ul> <li>If you have been given Pregabalin as part of your analgesia regimen this will be stopped today</li> <li>Your team will ensure your discharge medications are ready</li> </ul>	
	<ul> <li>Some of your intravenous lines will be removed if not needed</li> </ul>	
٢	<ul> <li>Raise any questions or concerns to your team</li> <li>Ensure you are confident with your Tinzaparin injection administration</li> <li>Continue planning your discharge (refer to SAFER discharge checklist on page 12)</li> </ul>	

## Day 4 after your surgery

Task		Completed
<b>S</b> -	Dress and mobilise freely in preparation for discharge	
	Eat normally and drink normally as tolerated Chewing gum/boiled sweets 3 times for 20 minutes	
	• Make your team aware if you are in pain • You will have all of your medications explained to you before discharge	
<b>Ö</b> -	Your team will remove your intravenous cannula once all of your drains have been safely removed	
	Raise any questions or concerns to your team Discharge home – SAFER discharge checklist achieved (page 12)	

# **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. 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.

## **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.



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Removable stitches



Tegaderm dressing

Surgical skin clips

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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.

