

The Gynaecology Enhanced Recovery Programme

Gynaecology Department

Information for Patients

Last reviewed: May 2024

Next review: May 2027

Leaflet number: 920 Version: 3

What is enhanced recovery?

This booklet is to help you understand the Gynaecology Enhanced Recovery Programme and **how you will play an active part** in your recovery. Aspects of this care can vary from what you might expect. This programme is different to traditional care and can improve your recovery a lot.

This booklet describes the steps in your journey of care until you are ready to go home. This is usually 1 to 3 days after your operation dependant on which operation you have.

Enhanced recovery is a structured pathway. It aims to lower the risk of medical problems. You will play an active part by:

- following a nutrition plan before you come into hospital. This will make sure you are well nourished and hydrated. This will help with wound healing and energy levels after your operation.
- sitting out of bed 6 hours after your surgery. This will help lower the risk of feeling sick (nausea) or being sick (vomiting) after your operation. The nurses will help you with this.
- taking regular walks around the ward (and when you go home). This will reduce the risk of chest infections, blood clots in the bloods vessels (deep vein thrombosis DVT) or lungs (pulmonary embolism PE).

If there is anything you are not sure about, please ask a member of staff or call one of the numbers at the end of this booklet.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

The day of your operation

Theatre Arrivals Area 1 (TAA)

- You will be admitted to Theatre Arrivals Area 1 (TAA) on the day of your operation.
- The ward nurse will go through a safety checklist with you and check your observations (blood pressure etc.).
- The nurse will show you around the ward and then show you where to wait.
- You will be given a gown and disposable pants to change into.
- The nurse will measure your lower legs and give you a pair of anti-embolism stockings (AES). These must be worn while you are in hospital. These stockings help to reduce the risk of blood clots.
- Please feel free to walk around the ward or to sit in the dayroom whilst you wait to go for your operation.
- Please note that you will go to ward 31 after your operation. Your belongings will be transferred during your operation to ward 31.

Ward 31

- After your operation, you will wake up in recovery.
- Once the recovery nurse is happy for you to transfer to ward 31, it is important that you do deep breathing exercises.
- Breathe in through your nose and relax the air out through your mouth.
- This should be done at least 5 times an hour. You may have some oxygen through a mask or through your nose when you go back to the ward.
- The nurses will help you out of bed into a chair 6 hours after your operation.
- You need to stay in the chair for 30 minutes.
- The nurse will help you back into bed.
- In bed it is important to move from side to side to stop your bottom from becoming sore. Again the nurses will help you to do this and will continue to do so throughout the night.

Eating and drinking after your operation

After your operation it is important that you drink unless you feel sick. Depending on the type of operation you have had you will be offered nutritional drinks and a light normal diet by the nurse.

Pain control

Good pain control improves your recovery as you can walk about, breathe deeply, eat and drink, feel relaxed and sleep well. You may have patient controlled analgesia (PCA). This has a button that you press to give yourself pain relief. There is a security device that prevents you taking too much. The anesthetist will discuss these options with you before the operation. You will also be given other pain killers by mouth or suppository which help in different ways.

Feeling sick

- After your operation you may feel or be sick. This is usually caused by the anesthetic or some of the drugs that are used.
- You will be given medication during your operation to reduce this.
- Sitting out of bed for a short period of time and sitting up in bed will also help to reduce this. If you continue to feel sick the nurse can give you more medication that should help.

Tubes, drips, drains and vaginal packs

- Whilst in theatre a tube (catheter) may be placed into your bladder so that your pee (urine) output can be measured.
- You will have a drip put into your arm and fluid will be given through this to make sure you do not become dehydrated.
- You may have a drain (small tube) coming out of your tummy wall which collects old blood left at the time of the operation.
- If you have your surgery through your vagina you will have vaginal packing (like a tampon) inserted into your vagina. All these will stay in place until the next day.

Monitoring

While you are in hospital we will check your blood pressure, pulse, breathing (respiration) rate and temperature regularly during the day and night. We will also check how much fluid you are taking in.

The first day after your operation

If you have had your operation through your vagina or by keyhole surgery you will be going home today. Expect to go home late afternoon or early evening.

Eating and drinking

It is important that you eat after your operation as this will help with wound healing and improving your energy levels.

You should try to drink about 8 to 10 cups of fluid a day unless you feel sick. You can drink a variety of non-fizzy drinks whilst in hospital.

You will be encouraged to use the ward dining room. Your nurse will give you post-operative nutrition drinks. Try to drink at least 2 of these.

Pain control

Your PCA will be removed this morning. The nurse will give you tablets regularly to help control your pain.

Tubes, drips, drains and vaginal packs

- Your catheter will be removed at 6am (unless you have a vaginal pack). You will need to pee into a container so the nurse can check how much pee you are passing. The nurse may also do a scan on your bladder to check that your bladder is emptying properly.
- If you still have a drip in your arm and you are eating and drinking well this will be removed.
- If you have a drain in your tummy which has stopped draining, this will also be removed by the nurse.
- If you have vaginal packing this will be removed by the nurse in the morning between 8am and 10am.
- If you also have a catheter this will be removed 1 hour after your vaginal pack has been removed.
- Removing these tubes and drains as soon as possible helps to reduce the risk of infection and also helps you to mobilise more freely.

Moving around (mobilisation)

On each day after your surgery it is advised that you sit out in the chair for short periods with rests on the bed as needed. You should aim to walk along the ward corridor and back 4 times (about 60 metres 4 times).

Being out of bed in a more upright position and walking regularly helps you to improve your breathing. There is also less chance of you developing a chest infection or clots in your legs. It also helps your bowel function to work sooner.

Day 1 to day 2 after your operation

If your recovery has gone to plan expect to be discharged today. Expect to go home late afternoon or early evening.

Eating and drinking

Continue to eat and drink as much as you can tolerate.

Please ask your nurse for your post-operative nutrition drink. Try to have 2 drinks each day.

Pain control

You should now be on tablets to control your pain. We would recommend that you continue to take these tablets regularly when you go home. Your nurse will advise you and also give you an information sheet.

Tubes, drips, drains and vaginal packs

If for any reason some of these were not removed yesterday they will be removed today.

Moving around

On each day after your surgery it is advised that you sit out in the chair for short periods with rests on the bed as needed. You should aim to walk along the ward corridor and back 8 times.

Being out of bed in a more upright position and walking regularly helps you to improve your breathing. There is also less chance of you developing a chest infection or clots in your legs. It also helps your bowel function to work sooner.

Monitoring

Your blood pressure, pulse, respiration rate and temperature will be checked regularly throughout the day and night. You will have a blood test this morning. You need to continue to eat and drink. Mobilise and get ready to go home.

The importance of rest and recovery (recuperation)

We believe that rest and recuperation is vital to help you recover after your operation, on the ward and at home. Ward 31 aims to make sure you have a chance to rest during the day. The best time on the ward to do this is between 1pm and 4pm.

We would ask you and your visitors to:

- switch mobile phones to silent/ off and take any calls away from the bay area.
- not use social media/ skype/ video call/ games etc.
- use personal head sets or earphones to listen to electronic devices.

Thank you for your co-operation.

Contact details

Leicester General Hospital - Gwendolen Road, Leicester LE5 4PW

Theatre Arrival Area 1 0116 258 8210

Ward 31 (visiting hours - 11am to 8pm) 0116 258 4843

Pre-assessment Clinic (open Monday to Friday 8am to 4pm) 0116 258 4839

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk