

**Information about Gynaecology Surgery**

**Obstetrics & Gynaecology**

**Queen Elizabeth University Hospital**

**1345 Govan Road,**

**Glasgow,**

**G51 4TF**

**☎ 0141 201 1100 Ask for Gynaecology Ward.**

**Preparing for Surgery**

This booklet will give you some information about what to expect when having gynaecology surgery. The aim of the information leaflet is to get you back to full health as quickly as possible after your surgery, and we encourage you to play an active part in your recovery.

Research has shown that after surgery, the sooner you move about and the earlier you are eating and drinking, the speedier your recovery will be. You are also less likely to develop complications after surgery, such as chest infections and blood clots.

The main elements of this booklet include:

1.Pre-operative assessment and preparation

2.Good care planning and pain relief after surgery

3.Early mobilisation (i.e. moving about) and return to eating and drinking as soon as possible after surgery.

If there is anything in this booklet you are not sure about, please ask.

**Things that affect your Health**

**Stop Smoking**

If you are a smoker we encourage you to stop. We understand that trying to stop at this stressful time is especially difficult. However, if you could stop smoking this would reduce your risk of complications such as chest and wound infections and helps you recover more quickly.

There are different options for people who want to stop smoking. You can talk to your nurse, your community pharmacist (local chemist) or your GP.

For further information and help on stopping smoking, please contact:

* Smoke free services: 0141 201 9825 (answer machine after 5pm)
* Smokeline: 0800 84 84 84
* Quitline: 0800 00 22 00 (NHS 24 hour Helpline)

Please do not smoke anywhere on NHS Greater Glasgow and Clyde grounds, this includes all buildings, all vehicles and car parks. You can use E-cigarettes in hospital grounds, but not within buildings and not around main entrances, fire exits and any other doorways.

**Alcohol**

If you drink alcohol try to reduce how much you drink in the weeks before your surgery.

You must not drink alcohol 48 hours before surgery as it can increase complications during your recovery.

**Nutrition**

We advise you to eat a healthy diet to make sure your body is prepared for surgery. Eating less fat and sugary foods, and eating plenty of fruit and vegetables can all help prevent complications following your surgery.

Nutrition before and after your surgery is a very important part of your treatment plan. Research has shown that carbohydrate drinks can help you feel better after surgery and improve recovery (please see page 5).

**Exercise**

Gentle exercise is advised to keep you healthy. This is particularly important before and after surgery as it can help with weight loss, muscle strength and stamina.

**Day of Surgery**

We will admit you to a ‘Same day’ Admission area on the day of your surgery.

Please bring in with you any medication you are taking and give this to the nurse responsible for your care.

On admission a member of the nursing staff will welcome you and check all your details. The nurse will discuss your care and treatment with you (and your family if you wish).

We will give you compression stockings to wear all the time you are in hospital and after you go home. These reduce the risks of blood clots in your legs and lungs. We may also give you an injection everyday throughout your hospital stay to further reduce the risks of blood clots.

**After your surgery**

After your surgery you will spend some time in the recovery area. The nursing staff will regularly monitor your blood pressure, pulse, temperature and oxygen levels and give you appropriate pain relief.

You may have a tube into a vein, ‘a drip’, to replace lost fluids but we will remove this as soon as possible. We will offer you a drink as soon as you wake up.

You may also have a face mask or a nasal prong to give you oxygen.

You may have a urinary catheter ‘a tube into your bladder.’

**Pain**

You may have a Patient Controlled Analgesia (PCA) pump. This is a syringe pump which contains morphine. You press the pumps handset anytime you feel pain and the morphine is administered intravenously as required every 3-5 minutes allowing you to control your own pain relief. There is a safety mechanism on the syringe which prevents you from receiving too much painkiller at any one time. Do not be afraid to press your handset whenever you feel any pain, nursing staff will instruct you how you use it. If you do not have a PCA please tell the nursing staff whenever you feel any pain and they will give you appropriate pain relief.

Sometimes the painkillers we give you following your surgery can make you constipated, we will give you medicine to take to help prevent this.

**Nausea or sickness**

You may experience some nausea or sickness however we will give you medication to help prevent this. If you have had your carbohydrate drinks before your surgery this should reduce any feelings of nausea or sickness. It is important to eat and drink soon after your surgery so if you do feel nauseated please tell the nurse as soon as possible. Ideally we would like you to be eating within 4 hours of your surgery.

**Breathing exercises**

You should try to take 5 deep breaths in through your nose and slowly out through your mouth. You should try to do this every hour and continue this through your hospital stay. This helps reduce the risks of chest infections.

**On return to the ward**

After your surgery we will transfer you from the recovery room to the gynaecology ward. We will introduce you to the nurse who will be responsible for your care during your stay in hospital. Your nurse will not always be on duty but the nurses looking after you will introduce themselves to you and answer any questions you or your family may have.

The nursing staff will continue to monitor your progress, checking your blood pressure, pulse and pain control. If you have any fluids through a drip we will stop these as soon as you are able to drink on your own.

 If you have surgery in the morning, about 6 hours after your surgery we will help you out of bed and encourage you to sit for around 2 hours and move around as able.

If you have surgery in the afternoon we will encourage you to do your deep breathing and leg exercises as soon as you return to the ward. You will get up out of bed and walk around the following day.

**First day after your surgery**

If you have a Patient Controlled Analgesia (PCA) pump we will stop this. However, we will continue to give you medication (most likely oral painkillers) to control your pain. If you are in pain please tell the nursing staff.

If you have a urinary catheter we will remove this unless your consultant tells us otherwise.

We will expect you to get out of bed and have a shower, with assistance if required.

You will be able to eat and drink as normal.

We will encourage you to be up out of bed for at least 8 hours with rests throughout the day.

We will encourage you to walk, with assistance if required for short distances around the ward.

The day after your surgery you may see the physiotherapist who will give you advice about moving about and any exercises that will help your recovery.

**Second and third day after your surgery**

You will continue on oral pain killers as required to keep your pain under control.

You will be eating and drinking as normal.

We will encourage you to get up and move around the ward for at least 8 hours with rest periods throughout the day.

Depending on your overall condition the nursing staff will now start to make arrangements with you and your relatives to allow you to go home.

You will be discharged when:

•Your pain is well controlled

•You are eating and drinking

•You are passing urine normally

•You are up and moving around the ward comfortably

We will give you further information before you go home regarding what will happen once you go home and what to do if you think there is something wrong, along with contact numbers for the ward.

It is important when you go home to shower every day and look after your wound, we will give you advice on this before you home.

**Practical steps to support your recovery**

Make plans for going home before you come into hospital.

You might find it useful to talk through with a friend, carer or family member to make sure that you have the practical support in place to support your recovery.

My to do list:

* Tell people that you are going into hospital.
* Pack a small bag with toiletries, nightwear etc.
* Bring your medication with you.
* Check that you have support for when you go home.
* Ask about when you can expect to go home.
* Arrange for someone to take you to the hospital and to collect you on the morning of your discharge.

We will give you an estimated date of discharge.

**You need to:**

* Take part in your recovery by following the advice and instructions from the clinical team.
* Be positive about your recovery.
* Start to eat and drink as soon as you are allowed.
* Let staff know if your pain is not well controlled or you feel nauseated.
* Be up out of bed as soon as you can and mobilise around the ward as agreed but not to over exert yourself.
* Understand your daily goals remembering little steps go a long way.

**Further Information**

If you have any questions please ask a member of staff.

We may telephone you with to ask a few questions regarding your experience so we can improve the care we give our patients.

**Contact Telephone Numbers:**

**Queen Elizabeth University Hospital –**

* Ward 49 - 0141 201 2282
* Pre-assessment – 0141 201 2286
* Same-day Admission Unit – 0141 201 1488

**Notes**

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