

Colorectal Surgery

Patient guidebook on
Enhanced Peri-operative Care (EPOC)

Date of surgery: _____



Contents

Introduction	3
<ul style="list-style-type: none">• Understanding your surgery	
Preparing yourself for surgery	4-6
<ul style="list-style-type: none">• Pre-operative assessment• Stop smoking and alcohol• Eating well and eating right• Staying active• Enhanced post-operative care instructions	
On the day of surgery	7
After surgery	8-9
<ul style="list-style-type: none">• Resuming normal diet• Resuming daily activities• Pain relief• Drain and stoma care• Discharge from hospital	
After discharge	10
<ul style="list-style-type: none">• What you can eat• Managing pain at home• Continuing activity and movement• Things to take note of	

Introduction

Colorectal surgery is a major surgery performed by highly skilled specialist surgeons. Our medical team strives to ensure a safe surgery with the best outcome for you. However, your understanding and participation in your treatment is key to achieving the best results.

This guidebook aims to help you understand and prepare you for the upcoming surgery. Your doctors and nurses will guide you throughout the entire process, from pre-surgery preparations to post-operative recovery. This guidebook will also provide guidance on how you can actively contribute to your recovery. Our goal is to help you be prepared both physically and mentally for the journey ahead, and to ensure a seamless surgical experience and comfortable recovery period.

Important note:

Please bring this guidebook with you to the following appointments:

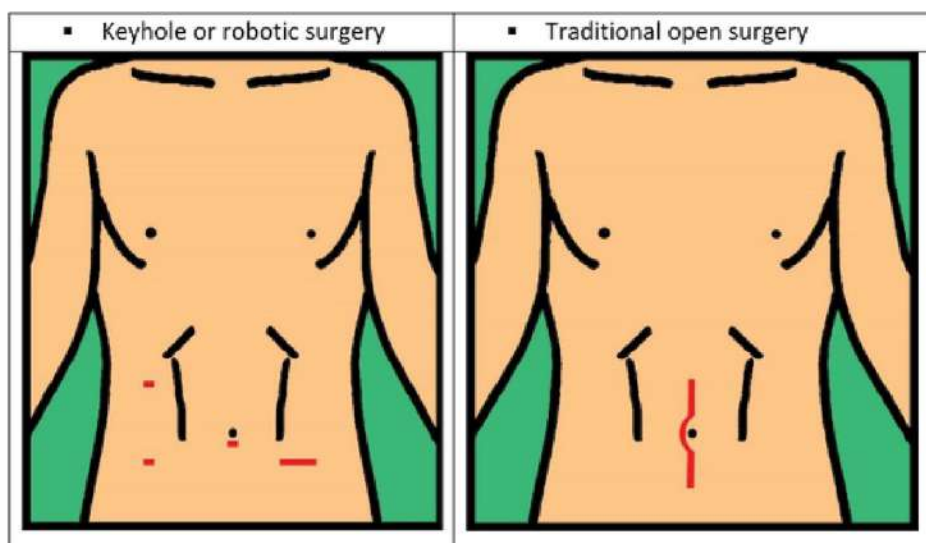
- Anaesthesia, Pain Management Clinic (APAC) counselling
- Nutrition and Dietetics Service
- Physiotherapy
- Short Stay Unit (on the day of surgery)

Things to bring to APAC appointment:

- Current medications that you are taking, including the packaging
- Any medical investigation reports done in private hospital or clinic settings

Understanding your surgery

Your surgery might include the removal of the diseased colon or rectum. The surgery will be performed through:



Preparing yourself for surgery

Pre-operative anaesthesia assessment

The doctor or nurse at APAC will perform a pre-operative anaesthesia assessment to ensure that you are suitable and ready for the surgery. They will also provide you information on different types of anaesthesia and pain management options during and after your surgery, based on your health profile. The best and safest routes for anaesthesia and pain management will be recommended for you after the assessment.

Stop smoking and alcohol

Smoking and alcohol consumption can cause complications, such as infection and flap failure, after your surgery and result in a slower recovery. Please let us know if you are keen to stop smoking before your surgery and we can support you through this journey.

You should stop smoking and alcohol consumption at least 2 weeks before your surgery. This will help your body to heal faster from the surgery.

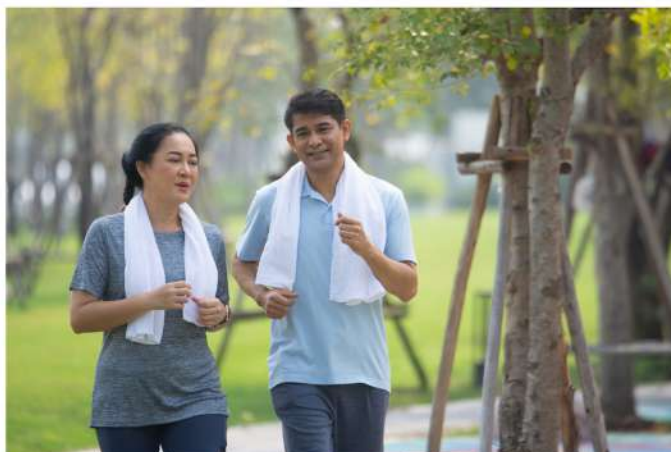
Eating well and eating right

Nutrition plays a crucial role before surgery because it affects the speed of your recovery. Remember to consume a well-balanced diet consisting of rice, meat, and vegetables. Protein-rich foods like meat, tofu, and eggs are essential to prepare your body for the procedure.

- Two weeks prior to surgery: Refrain from taking supplements and traditional medications unless prescribed by your healthcare provider. Seek clarification from your doctor if you have any concerns.
- One week before the surgery: Avoid nuts, seeds, hard-to-chew foods like mushrooms and sea cucumber, and uncooked foods such as salads.

Staying active

Undergoing a major surgery is like running a marathon as the body is subjected to high levels of stress. It is recommended that you optimise your fitness by exercising regularly before your surgery. Simple exercises like a 15 to 30 minute walk is better than being physically inactive. Staying fit will enhance your recovery from surgery and likely help you to return to normal activities faster.



Here are some exercises that would be useful for you:

□ Knee extension:



20 repetitions
3 times a day

□ Quadriceps tightening



10 sec hold, 10 repetitions
3 times a day

□ Bridging:



5 sec hold, 10 repetitions
3 times a day

□ Heel slides: with/without towel



20 repetitions
3 times a day

□ Sit to stand:



5 sec hold, 10 repetitions
3 times a day

Enhance Post Operative Care (EPOC) Instructions

Time	1 day before surgery
1pm	Take Neomycin 1g (2 tablets)
	Take Metronidazole 1g (5 tablets)
6pm	Continue low fiber diet during mealtime (Strictly no fruits & no vegetables)
	NO SOLID or JELLY once PEG started
6pm to 7pm	Dilute 1 packet of PEG into 1L of water
	Drink within 1 hour
7pm	Take Neomycin 1g (2 tablets)
	Take Metronidazole 1g (5 tablets)
8pm to 9pm	Dilute 1 packet of PEG into 1L of water
	Drink within 1 hour
10pm	Take Neomycin 1g (2 tablets)
	Take Metronidazole 1g (5 tablets)

On the day of surgery

Administer the Fleet enema at home 2 hours before leaving home, only if ordered by the Doctor

On the day of surgery

One day before your surgery, you will receive a call from our the Day Surgery Centre - Prep Holding Area and be advised on the reporting time.

Here's what to expect on the day of your surgery:

1. Registration at the Short Stay Unit (SSU)

Please arrive at the SSU and register yourself for the surgery. Once registration is completed, our nurses will attend to you shortly and direct you to an assigned bed.

2. Pre-operative preparation at the Prep Holding Area

Your nurse-in-charge will provide you with instructions to change into a hospital gown and remove your jewellery and belongings for safekeeping. Your nurse will also gather information from you to ensure you are fit for the surgery. The surgical team will complete the final assessment to review your health condition. The surgical nurse will then bring you to the induction area.

3. Preparing for anaesthesia administration at the induction area

The anaesthetist will set an intravenous cannula and then prepare you for anaesthesia administration. From there, the surgical team will bring you to the operating room and prepare you for surgery.

4. Post-surgery monitoring at the Post Anaesthesia Care Unit (PACU)

After the surgery, you will be sent first to the PACU for close monitoring before being transferred to the ward. You will likely have intravenous line(s), drain(s) over your abdomen and urinary catheter inserted.



After surgery

Nurses will put on calf pumps to reduce the risk deep vein thrombosis in your legs. You are also encouraged to do simple deep breathing exercise to prevent lung infection.



Resuming normal diet

You may be allowed to drink water a few hours after surgery depending on your condition. This begins as early as the day after surgery to meet your increased nutritional needs. You should gradually increase your oral intake by starting with fluids and nutritional drinks prescribed by doctor, then progress to eating normal food.



Inform your doctor or nurse if you experience any nausea or abdominal discomfort.

Resuming daily activities

You are expected to sit out of bed for at least 3 hours (cumulative) in a day on the first day after surgery. Sit or walk at least 6 hours a day in the subsequent days after your surgery. Your nurse and physiotherapist will assist you in resuming your normal daily activities after your surgery.

Eating well and resuming physical activities after surgery helps to speed up your recovery and reduce the risk of complications.

Pain relief

Good pain control is essential for a speedy return to normal activities. The medical team will ensure that you receive adequate analgesia so that you are able to move around the ward and eat without excessive pain.

Your doctors and nurses will ask you regularly about your pain score (scale of 0 to 10) and administer your analgesia accordingly.



0

Does not hurt



2

Hurts a little bit



4

Hurts a little more



6

Hurts even more



8

Hurts a whole lot



10

Hurts worst

Drain care

During the operation, you will have 3 to 4 surgical drains inserted. The doctor will provide guidance on when the drains should be removed before you are discharged.

Stoma care

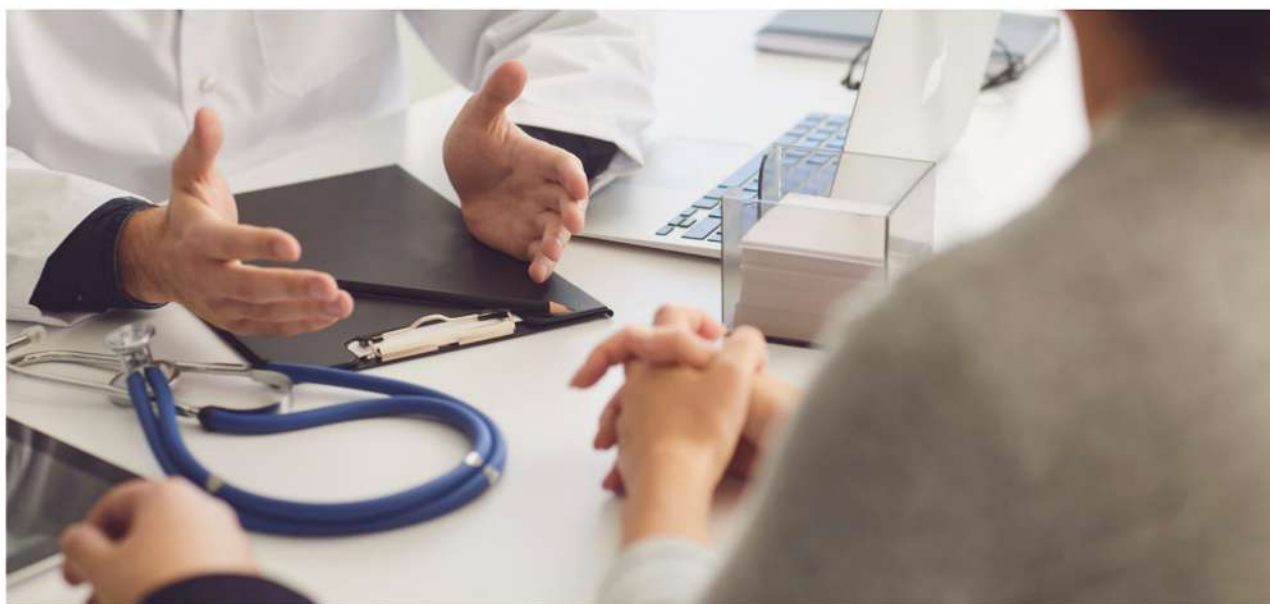
If you have a stoma after operation, our nurses will ensure that you and your caregiver are confident in looking after your stoma before going home.



Discharge from the hospital

Our goal is to ensure a smooth and swift post-surgery recovery and minimise the duration of your hospital stay. You will be discharged from hospital once you have passed gas and stool, are competent in managing your drains, and your pain is adequately controlled with oral medications.

You will be given a follow-up appointment to see your surgeon at the Specialist Clinic.



After discharge

What you can eat

You may resume eating and drinking normally upon returning home. We recommend starting with easily digestible, low-oil foods such as porridge, and gradually transitioning back to your regular diet within two weeks. It is normal to have reduced appetite after the surgery, but this should gradually improve.

You may also notice an increase in bowel movements initially, but this should improve over time.

Managing pain at home

You will be given oral painkillers upon discharge to help you reduce your pain and aid in your rehabilitation. We recommend you to take regular oral paracetamol for a few more days after discharge from hospital and reserve the stronger pain medication only when you need it.



Continuing activity and movement

After surgery, you may experience fatigue for weeks. However you should stay active with light activities, like walking at home. Avoid lifting heavy loads for 2 months after your surgery. Schedule a physiotherapy appointment after your discharge for follow-up support.

Things to take note of

If experience severe pain, fever, nausea or repeated vomiting, please contact us immediately or visit the Emergency Department.

You should also seek immediate medical attention if you experience breathlessness or notice fresh bleeding from surgical wound or drains.



For any enquiries about this booklet, please contact us at 6363 3000.

Contributed by Enhanced Peri-operative Care (EPOC) Work Group

This brochure is produced for educational purposes and should not be used as a substitute for medical diagnosis or treatment. Please seek the advice of a qualified healthcare provider before starting any treatment or if you have any questions related to your health or medical condition.

Information shared is accurate as of April 2024 and subject to revision without prior notice.



Scan QR code to download e-brochure