Planning your discharge and caring for yourself at home

Please take some time to read this booklet. It is important to start thinking about your plan for going home. This will help make your move back home as smooth as possible.

It may be helpful to read this booklet with a family member or friend who will be helping you at home.

Reading this booklet will help you know:

- Why it is important to plan your discharge from the hospital.
- What you can do to be ready to leave the hospital.
- How to care for yourself at home during your recovery.
- When to get medical help.

This booklet provides general information only. It is not meant to replace the advice of your surgeon and health care team.
Planning your discharge from the hospital

Why is it important to plan my discharge?

• After your surgery, you and your health care team will begin planning your discharge as soon as possible. Planning ahead will help you feel prepared and make your move home go as smoothly as possible.
• During your hospital stay, your healthcare providers will help you prepare for going home. They will help you to learn how to care for yourself. If needed, they will help you learn new skills. Please ask questions and discuss your concerns at any time.
• You may need further care after you leave the hospital. Discharge planning includes making arrangements for health services in your home or community.

When will I be discharged?

• When you are discharged will depend on how well you are recovering from your surgery.
• The time it takes to recover is different for everyone.
• Your body will continue healing at home.
• When you no longer need close observation or care from the health care team, you will be discharged.
• The hospital staff will tell you the expected date of your discharge.
• You will usually know a day or two before you can go home.
• At University Health Network (UHN), the discharge time is 11:00 am. Sometimes it may be later than this. Please check with your nurse before you call your family member to pick you up.
Before you call your family to pick you up, talk to the nurse and confirm the time that you can leave.

What can I do to make my trip home more comfortable?

• Take your pain medicine just before you leave the hospital. This will make your ride home more comfortable.
• You may also ask for medicine to control nausea.
• Place a small pillow in between your abdomen and the seat belt for comfort.
• If you have a long car ride, take breaks every 1 to 2 hours to stretch your legs.

How do I pick up my new medicines?

• Plan to pick up your prescriptions on the day you leave the hospital.
• A family member can fill your prescription at your pharmacy, or you can do this at the hospital before you leave.

<table>
<thead>
<tr>
<th>Toronto General Hospital Pharmacy (1st floor)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours: Monday to Friday from 8:00 am to 6:00 pm</td>
</tr>
<tr>
<td>Saturdays from 9:00 am to 2:00 pm</td>
</tr>
<tr>
<td>Phone number: 416 340 4800 extension 3611</td>
</tr>
</tbody>
</table>

• If you have any questions about your new medicines, ask to speak with a pharmacist.
• Your new prescriptions will likely last about 1 week. Your family doctor can re-order them if they are still needed after this time.
When can I start taking the medicines I took before my surgery again?

- Read the Discharge Summary from your surgeon. It will tell you if your surgeon has made changes to the medicines you took before your surgery. Your prescription may also give you this information.

- Check with your family doctor before re-starting any medicines that you were taking before your surgery.
## My discharge checklist

**Before you leave the hospital, make sure you have:**

- **The Discharge Summary from your surgeon**
  This is a summary of your surgery and care for your medical records. It is not an instruction sheet for you. Your family doctor will be given a copy from the Toronto General Hospital.

- **Your blue "hospital card"**
  Bring this card each time you visit the hospital.

- **Written discharge instructions**
  You may need special instructions for your diet, activity and care at home.

- **Prescriptions**
  You may be given prescriptions for new medicines that you need to take.

- **A few supplies, if needed**
  For example, a staple remover to give to your family doctor.

- **Instructions for making an appointment with your surgeon**
  Make this appointment as soon as you get home.

- **Information about our Nurse Navigator program**
  Call our Nurse Navigators (registered nurses) for advice, information and support at home.

- **Information about Community Care Access Centre (CCAC)**
  A CCAC case manager can arrange home care services, if needed.
1. Making follow-up appointments

As soon as possible, make appointments for follow-up visits with:

- Your surgeon
- Your family doctor — for about 1 week after you get home

At your follow-up visit, your surgeon will:

- Ask about your recovery at home
- Discuss any findings from your surgery
- Check your incision
- Check for any problems after your surgery
- Review your medicines
- Decide with you if you need any further treatment
- Answer your questions

At your follow-up visit, your family doctor will:

- Ask how you are feeling and managing at home
- Check your incision
- Review your medicines
- Answer your questions

What if I do not have a family doctor?

If you live in or near Toronto, call the Family Health Clinic at the Toronto Western Hospital: 416 603 5800 extension 5888.

If you live outside of Toronto, call Health Care Connect at 1 800 445 1822 to help you find a doctor in your community.
2. Managing your pain

How much pain is normal?

It is normal to have some pain after you leave the hospital. Pain from your incision may last another 1 or 2 weeks, but it should get a little better each day.

You will be given a prescription for pain medicine. At first, you may need to take this medicine frequently to manage your pain.

### Tips for managing pain

- **Take pain medicine as directed, to keep yourself comfortable.** Never take more than the safe amount prescribed for you.

- **Take medicine when you have a moderate amount of pain.** This would be about 4 out of 10 on the hospital's pain rating scale.

- **Do not be afraid to take pain medicine.** Medicine relieves pain so that you will feel better and get back to doing your regular activities.

- **Plan to do an activity about half an hour (30 minutes) after taking your pain medicine.** This gives the medicine time to take effect.

- **As your pain gets better, you should take less pain medicine.**

- **When you only have mild pain, take a mild pain medicine such as acetaminophen (Tylenol®).** Follow your doctor's instructions or the directions on the package.

- **Keep a diary or write down: how much pain you are having, how much pain medicine you take, and when you take it.**
What side effects are possible with pain medicine?

The most common side effects to watch for are constipation and drowsiness.

**Constipation**

- Constipation means having fewer bowel movements, or hard, dry bowel movements that are hard to pass.
- Healthy eating and activity can help to prevent constipation.
- Read page 14 for more information.

**Drowsiness**

- Prescription pain medicine may make you feel drowsy or sleepy.
- Do not drive or drink alcohol while taking this medicine.

Read the printed information that came with your prescription for a full list of possible side effects.

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**When should I get help?**

- **If your pain is not controlled by pain medicine** or your pain suddenly gets worse, go to the nearest hospital emergency department right away.

- **If you still have pain 2 weeks after surgery,** call your family doctor.
4. Taking care of your incision

Depending on the type of surgery you had, you may have one long incision or a few small incisions.

How do I check my incision?

- On your first day at home, take a close look at your incision.
- You may want to take a picture to remember the way it looks right after surgery.
- Every day for the next 2 weeks, check your incision and the skin around it. Notice any changes. Watch for the 6 signs of infection in the chart below.
- Do not touch your incision until it has fully healed.

<table>
<thead>
<tr>
<th>Check your incision each day for these 6 signs of infection:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Fever • Your temperature is 38°C (100.4°F) or higher. Take your temperature at least once a day.</td>
</tr>
<tr>
<td>2. Redness • A red area around your incision that is getting bigger. A little redness around an incision is normal.</td>
</tr>
<tr>
<td>3. Swelling • The area around your incision feels hard or looks swollen.</td>
</tr>
<tr>
<td>4. Heat • The area around your incision feels hot.</td>
</tr>
<tr>
<td>5. Drainage • There is fluid coming from your incision that is green, yellow or bloody. It may smell bad. A little clear or pink fluid is normal.</td>
</tr>
<tr>
<td>6. Pain • Your incision is getting more painful since you got home.</td>
</tr>
</tbody>
</table>
How can I prevent infections?

- The best way to prevent the spread of viruses and bacteria is to wash your hands often.
- You can wash with soap and water or use a hand rub.

How will I know when my incision has healed?

- Your skin will heal in 1 to 2 weeks. A healed incision will have no opening, leaking or scabs. After 2 weeks, your incision should be completely closed and dry.
- Healing under the skin takes longer, up to 3 months.
- It is normal for the area around your incision to feel itchy while it is healing.

I have staples on my incision. When will they be removed?

- Your staples will be removed 10 to 14 days after your surgery.
  - If you are in the hospital, a nurse will take them out.
  - If you are at home, your family doctor can take them out.
  - If you are getting home care, your home care nurse can take them out.
- After your staples are removed, Steri-Strip™ tapes will be placed across your incision.

I have Steri-Strips™ on my incision. When will they be removed?

- Steri-Strip tapes make sure the edges of your incision heal tightly together. They can be left on for up to 1 week.
- You can shower with Steri-Strips on. Pat them dry after your shower.
- If the Steri-Strips start to peel off, you can gently remove them.
- If they have not come off after 1 week, you can remove them.
Can I take a shower while I am healing?

- Yes, you may shower while your incision is healing. Let the water run over your incision. Gently pat it dry after showering with a clean wash cloth or towel.
- Do not use soap or body wash directly on your incision. It is fine if some soapy water runs over your incision and gets rinsed off.
- Do not put powder, cream, lotion or any type of ointment on your incision.
- Do not bathe, swim or use a hot tub until your incision is fully healed. Check with your doctor or surgeon about when you can take a bath.

Is it normal to feel numbness around my incision?

- Yes. The skin around your incision may feel numb. Some numbness may be permanent.

What do I do if my incision opens up?

- If your incision opens up — even just a little bit — go to your nearest hospital emergency department right away.
- After treatment, a home care nurse may visit 1 or 2 times a day to check, clean and dress your wound.

When should I get help?

- **If you notice any signs of infection**, visit your family doctor right away. If you cannot see your family doctor, go to the nearest hospital emergency department.

- **If your incision opens up—even just a little bit**—go to the nearest hospital emergency department. If possible, come to the Toronto General Hospital.
5. Caring for your drain

After surgery, you may have a tube called a drain coming out of your abdomen (belly). The purpose of the drain is to remove fluid from the area where you had surgery. The drainage is collected in a bulb or bag. The amount of drainage slowly decreases until the drain can be taken out.

In the hospital, the nurses will show you how to empty the drain and keep track of the amount of drainage. You will have a chance to ask questions and practice emptying the drain.

At home, you will empty the drain and measure the amount of drainage. Use the chart below to keep track of the drainage. A home care nurse will visit you to change the dressing and check for infection.

<table>
<thead>
<tr>
<th>Drainage record</th>
<th>Date</th>
<th>Time drain was emptied</th>
<th>Amount of drainage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: June 4</td>
<td>11:00 am</td>
<td>50 ml</td>
<td></td>
</tr>
</tbody>
</table>
How do I care for a PTC drain?

A PTC drain is a bile duct drain. If you have a PTC drain, you will get a pamphlet called "Caring for your PTCD". Please show this pamphlet to your home care nurse and your family doctor at your next visit.

<table>
<thead>
<tr>
<th>If you have problems with your PTC drain</th>
<th></th>
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</thead>
<tbody>
<tr>
<td><strong>On Monday to Friday</strong></td>
<td><strong>Call the TGH Medical Imaging Department at 416 340 3362</strong></td>
</tr>
<tr>
<td>between 8:00 am and 4:00 pm</td>
<td></td>
</tr>
<tr>
<td><strong>On evenings and weekends</strong></td>
<td><strong>Go to the Toronto General Hospital or Toronto Western Hospital emergency department</strong></td>
</tr>
</tbody>
</table>

6. Healthy eating

Unless your surgeon gives you other instructions, you can start to eat your usual foods. You may meet with a dietitian and follow a special diet if you had surgery such as:

- removing all or part of your stomach or bowels
- ileostomy or a Whipple procedure

Eating healthy foods can help you heal and recover after surgery.

I'm not very hungry. What should I do?

- It may take a few weeks for your appetite to return to normal.
- Eat small meals every few hours instead of 3 large meals a day. This will help your body digest food more easily and will not make you feel full.
- Try eating food and drinking liquids separately.

How can I cope with nausea (feeling sick)?

- If you have nausea you can take dimenhydrinate (Gravol®).
- Before you buy Gravol at the pharmacy, ask your pharmacist if it is safe for you to take with your other medicines. If Gravol makes you feel drowsy, take only half of a tablet.
- Nausea can be worse with an empty stomach. Try eating small amounts of bland foods such as plain crackers, rice or dry toast.
- Do not eat fatty or fried foods, alcohol, coffee or foods that cause you to feel bloated or gassy.
- Sit upright while eating and do not lie down right after eating.
7. Helping your bowels move

If you had surgery on your stomach or bowels, do not be concerned if you notice a change in your bowel habits for a few weeks.

- You may have bowel movements (stools) more or less often than usual.
- Your stools may be harder or softer than before surgery.

If you have a new ileostomy or colostomy, you will meet with a nurse specialist in the hospital. He or she will help you learn how to care for your new ileostomy or colostomy.

You may become constipated due to changes in your diet and activity, or from taking strong pain medicines, such as:

- hydromorphone
- oxycodone
- oxycodone with acetaminophen (Percocet®)
- codeine with acetaminophen (Tylenol® # 3)

### Tips to prevent constipation

- Add fibre to your diet. Eat foods that are high in fibre such as fruits, vegetables and foods containing bran or whole grains.
- Drink plenty of fluids. Unless your doctor has given you other instructions, drink 6 to 8 cups of water or other fluids a day (1 cup = 250 ml). Limit fluids that contain caffeine such as coffee, tea and cola.
- Increase your daily activity. Physical activity such as walking can help keep your bowels active.
- If you have not had a bowel movement in 2 days, take a stool softener. Your surgeon may have prescribed docusate sodium (Colace®) or senna (Senokot®). If you do not have a prescription, ask your pharmacist which one to buy at the pharmacy.
- When you are having regular bowel movements again, you should stop taking the stool softener unless you continue to take strong pain medicine.
- If the stool softener does not help you move your bowels, ask the pharmacist to suggest a mild laxative.
When should I get help?

- **If you do not have a bowel movement in 5 days**, go to your family doctor. If you cannot see your doctor, go to your nearest hospital emergency department.

- **If your bowel movements look bloody or black**, go to your nearest emergency department.
8. Drinking fluids

Without enough fluids, your body gets dehydrated. This can happen when:

- you are not drinking enough fluids
- you are losing fluids due to vomiting or diarrhea

If you are vomiting or have diarrhea, your body can lose large amounts of water quickly.

What are the signs of dehydration?

<table>
<thead>
<tr>
<th>The Five D's:</th>
<th>Other signs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Decreased amount of urine</td>
<td>• fast heart rate</td>
</tr>
<tr>
<td>2. Dark coloured urine</td>
<td>• nausea</td>
</tr>
<tr>
<td>3. Dizziness</td>
<td>• headache</td>
</tr>
<tr>
<td>4. Dry mouth</td>
<td>• confusion</td>
</tr>
<tr>
<td>5. Diarrhea or vomiting</td>
<td></td>
</tr>
</tbody>
</table>

How can I prevent dehydration?

- Unless your doctor has given you other instructions, drink 6 to 8 cups of water or other fluids a day (1 cup = 250 ml).
- Limit fluids that contain caffeine such as coffee, tea or colas. Caffeine causes you to lose fluid.

Drinking lots of fluids can also help to prevent urinary tract infections.

What are the signs of a urinary tract infection?

- A burning feeling when you pass urine
- You are passing small amounts of urine often
- Your urine has a strong or bad smell
When should I get help?

- If you have any signs of dehydration or a urinary tract infection, go to your family doctor for treatment.

- If you have persistent vomiting or diarrhea, go to your family doctor. If you cannot see the doctor, go to your nearest hospital emergency department.
9. Activity and exercise

What activities should I do?

• It is important to continue to be active at home. Daily activity will help to improve your strength and mobility.
• Try to be a little more active each day.
• Walking is a good way to stay active. Start with a short walk. Each day you can walk a bit further.
• If your physiotherapist gave you an exercise plan, continue to do these exercises each day.
• Take your pain medicine half an hour before activity. With less pain you will be able to move better.
• Activity takes a lot of energy. It is normal to feel tired and have some mild discomfort following activity. Plan some time to rest before and after activity.

What activities should I avoid?

• Avoid activities that are strenuous or put strain on your incision. For example: vacuuming, lawn mowing and carrying anything heavy.
• Avoid any activity that causes pain. If an exercise causes pain, stop. Do not continue doing it.

My legs are swollen. What can I do?

• It may take a few weeks for the swelling in your legs to go down. Activities such as walking can help. Avoid crossing your legs, and sitting or standing for long periods of time.
• Leg exercises will help keep blood flowing in your legs, ankles and feet. Continue to do them until you are up and walking often.
Leg exercises

- Try to pump your ankles 10 times every hour when you are not active.
- Move your foot up and down while you are lying down.
- Raise your legs with pillows while you are resting or sleeping.
- If you left the hospital wearing compression stockings, keep using them until you are walking around a few times a day. Take them off each night to wash them by hand in soapy water. Rinse and hang to dry.

Do I need to do deep breathing and coughing?

Yes, continue deep breathing and coughing exercises for 2 weeks at home. These exercises help clear your lungs and prevent infection.

Deep breathing and coughing exercises

Deep breathing

- Sit up comfortably with your back and arms supported.
- Take a long, slow breath in through your nose. Then, blow out slowly through your mouth - like you are blowing out candles.
- Do this 10 times every hour that you are awake.

Coughing

- Put a pillow over your stomach for support and to reduce pain from your incision.
- After 10 deep breaths, take one more deep breath and follow with a strong cough.
10. Daily living

When can I drive again?

- Ask your family doctor or surgeon when it is safe for you to drive again. Before you drive, you must be comfortable with turning to check your blind spot and pushing on the brake pedal. You must also be able to react quickly if you need to stop suddenly.
- Before you start driving again, you must not be taking any strong pain medicine.

What housework can I do?

- If you can, arrange to have someone help you at home for the first few weeks.
- You should start with light activities such as dusting and tidying up the house.
- Do not do tiring chores such as vacuuming, yard work or laundry.

What can I lift?

- Do not lift more than 5 to 10 lbs (2.5 to 4.5 kilograms) for 4 to 6 weeks after surgery. For example, do not lift children, pets, backpacks, luggage, laundry baskets or grocery bags.
- When you lift, take slow deep breaths. Do not hold your breath.

When can I return to work?

The length of time you need to be off work will depend on:

- the type of surgery you had
- how well you are recovering
- the physical demands of your job

At your follow-up appointment, you and your surgeon can talk about your work and decide what is best for you.
When can I have sex?

- You can resume sexual activity when you feel comfortable. You may want to wait a few weeks until you have less pain and more energy.
- When you are able to climb 2 flights of stairs comfortably, you are probably ready for sexual activity.
- When you have sex, choose positions that do not strain the muscles of your abdomen.
11. Your emotions

Is it normal to feel 'down' after surgery?

• Yes. It is normal to be emotional after your surgery. For the first few weeks after your surgery, you may have times when you feel depressed, anxious or alone. Usually these feelings do not last very long. It can help to talk about your feelings with someone close to you.

• If you are still not feeling like yourself after a few weeks, talk with your family doctor.

How can I cope with boredom?

• Stay in touch with family members and friends. If you feel up to it, call a family member or have someone visit you once a day.

• Try to keep yourself busy. It is normal to feel bored when you are less active than usual. Read, watch TV or do other things you enjoy to help pass the time. You can borrow books and DVDs from your local public library.

• You may enjoy trying a new hobby, like a craft or puzzle.

• Try to go outdoors at least once a day. Even sitting outside for a short time can feel good.

What about visitors?

• Family and friends play an important role in helping you recover.

• However, too many visitors or telephone calls can leave you feeling tired. Do not be afraid to ask your visitors to leave if you are tired and would like to rest.
When to get medical help

Call a Nurse Navigator if:

- You have questions about your recovery.
- You have a problem and do not know if you need medical help.

Call a Nurse Navigator at 416 262 1992

Go to your family doctor if:

- You continue to have pain after 2 weeks, that is not relieved by pain medicine.
- It burns when you pass urine or you have a strong need to pass urine, but pass only small amounts.
- Your incision is red, swollen, painful or feels hot.
- Your incision is leaking pus or fluid that is green, yellow or bloody.
- You have not had a bowel movement in 5 days.
- You have nausea or vomiting that does not go away.
- You have diarrhea that does not go away.

If you cannot see your family doctor the day you call or the next day, go to the nearest hospital emergency department.

Go to the emergency department if:

- Your abdominal pain gets suddenly worse.
- You have chest pain or shortness of breath call 911.
- You have a temperature of 38 °C (100.4 °F) or higher.
- Your bowel movements are bloody or black.
- Your incision opens up.
My appointments and special instructions

Family doctor appointment (within 1 week of leaving the hospital)

Date: ____________________  Time: ____________________

Follow-up appointment with surgeon: ______ weeks after surgery

Dr. _________________________

Phone number: ____________________

Date: ____________________  Time: ____________________

Other appointments:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Other instructions:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Important phone numbers:

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toronto General Hospital</td>
<td>416 340 4800</td>
</tr>
<tr>
<td>Nurse Navigators</td>
<td>416 262 1992</td>
</tr>
<tr>
<td>General Surgery Clinic</td>
<td>416 340 4800 extension 8060</td>
</tr>
<tr>
<td>9ES General Surgery Unit</td>
<td>416 340 3522</td>
</tr>
<tr>
<td>Community Care Access Centre (CCAC)</td>
<td>310 CCAC (2222)</td>
</tr>
</tbody>
</table>

Ask for your local CCAC office.