

Enhanced Recovery Programme for Stoma Patients (1 of 5)

What is the Enhanced Recovery Programme?

The aim of the Enhanced Recovery Programme is to get you back to full health as soon as possible after your operation and for you to play an active part in your recovery.

Research shows that, after surgery, the earlier we get you eating, drinking and out of bed the better. This will speed up your recovery, making it less likely that complications will develop.

For example, the benefits of early movement are:

- reduced risk of chest infections or areas of lung collapse
- less muscle wastage, so that function and mobility are maintained
- less tiredness
- reduced risk of developing blood clots.

To achieve this, we need you to work in partnership with us to get you better.

This information leaflet has been written to explain the 'Enhanced Recovery Programme'; it is not intended to explain all about stomas. You will have been given separate information about these and their care. This will include the difference between an ileostomy and a colostomy.

Before you come into hospital

The consultant and/or specialist nurse will see you and explain the programme to you and your family. You will be given plenty of opportunity to ask questions. If you think you might forget your questions, it is a good idea to write them down before coming to your appointment.

The specialist nurse will discuss your home arrangements with you so that, together, we can plan any help you may need after you are discharged from hospital.

The consultant will explain if there is a need for you to have a colostomy or ileostomy as part of your operation. If this is necessary, you will be seen by the stoma care nurse specialists who will talk to you and give you written and practical information. They will be able to answer your questions and offer continuing support.

Normally you will be asked to attend a pre-admission appointment in the week leading up to your operation. This will make sure that you are ready

Stoma Care
Direct dial: 01722 429256



If you need your information in another language or medium (audio, large print, etc) please contact Customer Care on 0800 374 208 or send an email to: customer care@salisbury.nhs.uk

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

Please complete The Friends & Family Test to tell us about your experience at: www.salisbury.nhs.uk/FriendsFamily or download our App from the Apple App store or Google Play Store.

The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@salisbury.nhs.uk if you would like a reference list.

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for your operation. Blood tests and other tests needed will also be done at the pre-admission clinic.

The stoma care department will contact you by letter or telephone to come for an appointment on the same afternoon as your pre-admission appointment. You will also be sent a booklet to read before you attend.

The aim of this appointment is to:

- answer any questions or concerns you may have about the colostomy or ileostomy after reading the booklet
- discuss the type of stoma you will be having
- show you how to empty and change a stoma pouch
- help with choosing an appropriate stoma pouch
- tell you how to obtain supplies when leaving the hospital and in the future
- with the stoma care nurses help, decide where the stoma will be positioned on your tummy (abdomen)
- involve any relative or carer who may be able to help you at home
- tell you about the stoma care nurses role whilst you are in hospital and the support they can provide for you in the future
- advise you about any foods you may need to avoid
- discuss clothing, hobbies, sexual activity, driving, travel and returning to work.

The day before your operation

You can eat normal food until 6 hours before your operation and drink (no milk) until 2 hours before your operation. You may be asked to go to Britford unit to collect 2 protein drinks (to help with wound healing) and have an injection of Dalteparin (this injection will make your blood take a little longer than normal to clot and helps prevent DVT (blood clots) developing.

Sometimes the consultant may want you to have some medication to clean your bowel before your operation. If you need it, you will be given 2 doses 4 hours apart. This will give you diarrhoea. Alternatively, you will have an enema on the morning of your operation to empty your bowel.

The day of your operation

When you have your operation you may be given an epidural catheter or a 'pain buster' (a small pump) which delivers local anaesthetic into your wound to control the pain. This will stay in place for 2 days. There is separate written information about this; please ask if you would like a copy. You will also be given regular tablets for pain relief. The epidural is not a replacement for a general anaesthetic.

Medication will be given to stop you feeling sick. You will have a catheter inserted into your bladder. This is to drain the urine from your bladder and to help you feel more comfortable.

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It will be removed the day after your operation.

When you get back to the ward after your operation the nurses and/or physiotherapist will help you get out of bed. You will sit out for 2 hours and you must move around as much as you can. The physiotherapist and/or nurses may also teach you deep breathing exercises and bed/chair exercises.

You will be able to eat and drink straight away, something light like a bowl of soup and bread and butter. You will also need to drink 2 protein drinks.

The nurses will look at the colour of the stoma and see if it has started to work. If it has, they will show you how to empty the pouch and you will be encouraged by the ward nurses to do this whenever necessary.

On the first day after your operation

- the catheter in your bladder will be removed in the morning
- you will continue to have regular tablets for pain relief and your epidural catheter will remain in place
- you will need to drink 2 litres of fluid, including 4 protein drinks. These drinks will be kept in the fridge on the ward so you can go and get them from there when you want them
- you will also have normal food. The stoma care nurse can help you with your menu and talk about any worries you may have about food and drinks
- You will be up for 8 hours in total, with rests in between. We suggest that this is linked to meal times when you will walk to the dining area and also when you need to do your stoma care in the bathroom or toilet
- you will need to walk 3 times today, aiming for 150 metres in total
- you will be seen by the stoma care nurse and teaching about the care of your stoma will continue. This will include emptying and changing the pouch. You will be encouraged to join in and given the opportunity to ask questions.

We will talk about skin care, measuring the stoma, phantom feelings and quantity and consistency of the output of the stoma. The ward nurses will continue to help and support you.

On the second day after your operation

- your spinal epidural catheter/pain buster will be taken out. You will continue to have pain killers so your pain should be kept well under control
- you should continue to eat and drink normally and have your 4 protein drinks or milk. The stoma care nurse and ward nurses will continue to advise and help with your menu
- you will be up for 8 hours and take regular walks for meals and to use the bathroom and toilet
- you will be weighed
- your stoma care teaching will continue with the stoma care nurse and/or the ward nurse.

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On the third and fourth day after your operation

- you will continue with pain killers so any pain will be well controlled
- you will continue to eat and drink and have protein drinks and be offered help with your menu.

Teaching will continue from the stoma nurse and ward nurses. You should feel confident enough to empty the pouch by yourself by day 3. On day 4, if your relative/carer is able to come to the ward, you will then be able to show them a pouch change. Planning for you to go home will start.

If you have had an ileostomy, sometimes it is necessary to have some medication to slow the bowel down and to “firm up” the bowel motion.

If you have had a colostomy, it is sometimes necessary to have some medication to help the bowel to start working.

These tablets will be given to you to take home, if needed.

You will be discharged home on day 4 provided that:

- you feel confident about your discharge arrangements
- your pain is well controlled
- you are eating and drinking well
- there are no signs of infection in your wound
- you are passing urine normally
- you are up and about and carrying out normal activities like washing, dressing, making drinks etc
- you are self-caring regarding the care of your stoma and feeling confident.

If you wish, the stoma care nurse and ward nurse will watch you do another change of pouch.

You will be given:

- 2 weeks' worth of supplies
- a date for a home visit during the following week, or an appointment in the stoma department if you are attending a consultant appointment.

Details of your prescription will be faxed to your G.P. You can either ring and collect the prescription to take to the chemist yourself, or have the prescription sent to the chemist and the items delivered to your home. It is for you to decide which is best for you.

Before you leave the ward you will also be given telephone numbers to ring if you have any problems after going home.

One of the specialist nurses will phone you at home the day after your discharge.

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Advice after discharge

- daily activities and light exercise can begin as soon as you feel able to do them
- you can continue with sexual activity when you feel comfortable
- physical light work can be resumed after 2 weeks (i.e. housework, weeding the garden etc)
- physical heavier work and lifting (more than 10kgs) may be resumed after 4-6 weeks
- you can start driving again once you feel confident and safe to do an emergency stop; usually this will be 2-4 weeks after surgery. Please check with your insurance company that they are happy for you to start driving again.

Please note:

Physical activity and good food intake help to prevent tiredness. Try to have protein enriched food (meat, fish or eggs) in your daily diet as these are good for healing.

Make sure you have pain killers at home such as paracetamol. Regular pain relief will help you continue with daily activities and exercise and also aid rest and sleep.

Thank you for taking the time to read this information. We wish you a speedy and 'enhanced' recovery.