



PREPARATION FOR ABDOMINAL SURGERY

Colorectal and abdominal surgery are major and potentially life threatening procedures. Patients must follow the instructions listed below which are designed to minimize risk.

Failure to comply with these instructions may result in cancellation of the procedure.

If requested, patients must see their medical doctor for medical clearance prior to surgery.

Surgery usually requires between two and six hours under general and possibly epidural anesthesia. Patients can expect to spend at least five to seven days in hospital.

Recovery from surgery requires at least four to eight weeks before normal routines can be resumed.

RISKS OF SURGERY INCLUDE BUT ARE NOT LIMITED TO:

- Bleeding requiring blood product transfusion.
- Infection involving the surgical site, urinary bladder, intravenous site or respiratory system (pneumonia).
- Infection, abscess, or fistula of the abdominal, perianal and urinary areas. Such infections may require reoperation and possibly a colostomy or ileostomy. (Diversion of the fecal stream through a surgically created opening on the abdominal wall.) Reversing a colostomy or ileostomy means undergoing yet another procedure at a later date.
- Urinary retention (temporary inability to pass urine) requiring bladder catheterization.
- Intestinal dysfunction following surgery requiring placement of a tube through the nose into the stomach, and possibly, intravenous nutrition with a large intravenous catheter placed into the central veins of the body.
- Damage to the anal sphincters causing partial or complete incontinence.
- Deep Venous Thrombosis and Pulmonary Embolism (blood clots in the legs and lungs)
- A small but finite risk of stroke, heart attack, and death from anesthesia related complications.
- For patient undergoing laparoscopic procedures, there exists the possibility that the procedure cannot be completely or performed safely using laparoscopy and therefore standard surgical technique requiring a larger abdominal incision and prolonged recovery.

PREPARATION FOR ABDOMINAL AND INPATIENT SURGERY

DO NOT TAKE blood thinners, aspirin and nonsteroidal anti-inflammatory agents (Motrin, alleve, Excedrin, ibuprofen) for one week before the surgery

Patients taking coumadin or antiplatelet drugs should see their medical doctor before surgery.

Tylenol may be taken for aches and pains.

Consume only clear liquids on the day before surgery.

Purchase the prescribed bowel preparation kit, read and follow the instructions. Consume the preparation on the afternoon before the day of surgery.

This preparation will cause diarrhea in order to empty the colon and rectum prior to surgery.

Be sure consume at least 2 liters of water or clear liquids to prevent dehydration.

DO NOT EAT OR DRINK ANY FOOD OR BEVERAGE for eight hours prior to surgery.

Blood pressure and heart medications should be taken with a sip of water.

People with diabetes should plan to arrive early at the hospital for intravenous fluids.