

# Colon Cancer Surgery and Recovery

*A Guide for Patients and Families*



## **This Booklet**

You are receiving this booklet because you will be having surgery shortly. This booklet tells you what to do before, during, and after surgery. It also describes your daily goals while you are in the hospital.

# Welcome

Welcome to Mass General Hospital. Our hospital has brought together a team of experts in cancer care.

Our team constantly reviews the latest research to look for ways to improve treatment.

From this research, we have developed standard guidelines for the treatment of colon cancer.



All of Mass General's oncologists, radiation oncologists, surgeons, and nurses follow these guidelines. This helps make sure that our patients get the best possible care for their cancer.

## Colon Cancer Surgery

The treatment of colon cancer keeps improving. For example, for some patients, surgery can now be done through smaller incisions.

Although colon surgery is considered major surgery, most patients do not have problems afterwards. Many patients go home within 2-to-4 days after surgery.



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## *Getting Ready for Surgery*

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### **Colon Cancer Surgery**

Most people with colon cancer need surgery to remove part of their colon. Some may be helped by chemotherapy before or after surgery. A few may have only chemotherapy.

Once you have been diagnosed with colon cancer, you will be scheduled for testing to decide your treatment plan. A nurse will also meet with you to go over the care pathway.

The care pathway is a step-by-step plan for your care. When possible, this meeting will be the same day as your clinic appointment.



#### ***The Care Pathway***

The care pathway is different for each patient. For example, some patients will see an oncologist and a surgeon at the clinic before surgery. Others may have an appointment with a surgeon at the surgeon's clinic or office.

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# *Getting Ready for Surgery*

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## **How can I get ready for surgery?**

Here are some things you can do now that will help you get ready for surgery.

### ***Good Nutrition***

Good nutrition before surgery can help with your recovery.

- To help with healing, eat and drink plenty of protein and vitamin C. Good places to get protein are fish, chicken, beans, nuts, and whole grains. Good places to get vitamin C are citrus fruits or citrus juices, berries, green and red peppers, tomatoes, broccoli, and spinach.
- If you are not on a special diet for other medical reasons, try adding 1-to-3 nutritional drinks to your diet each day. Some examples are Ensure or Boost. This is especially important if you have lost more than 15 pounds recently or are over the age of 75. If you are overweight, losing weight before surgery will make the surgery safer for you.



### ***Stop Smoking***

If you smoke or use tobacco products, stop or at least try to cut down. Not smoking will help make your recovery easier. Ask your doctor about prescription medicines that can help you quit.

### ***Stop Drinking Alcohol***

Not drinking alcohol also makes recovery easier. Avoid or at least decrease the amount of alcohol you drink before your surgery.

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# *Getting Ready for Surgery*

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## **Anesthesia**

For your surgery, you will need anesthesia. This is medicine to make you feel relaxed, to control your pain, and to keep you asleep during surgery.

Anesthesia is given by an anesthesiologist. This is a doctor who specializes in this medicine. Mass General's anesthesiologists are part of our Cancer Care Team.



## **Preoperative Evaluation**

Before surgery, you will have a preoperative evaluation with nurses, nurse practitioners, anesthesiologists, and technologists. During this meeting:

- Your medical and surgical histories and medicines will be reviewed.
- You will be asked to have some tests. This will make sure your anesthesia and surgery are as safe as possible. The tests may include: a physical examination, blood tests, and an EKG.
- If you have heart or lung problems or if the team has any concerns, you may be asked to see a specialist or have more tests.

***Before your surgery, please ask your anesthesiologist any questions you may have!***

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# Getting Ready for Surgery

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## 1-to-2 Days Before Surgery

Read your instructions ahead of time to see what your surgical team wants you to do. Follow the instructions carefully to get ready for your surgery.

Make sure that you:

- Eat only what your surgeon tells you to. This is usually a clear liquid diet. This diet has fluids and foods that turn to liquid when they are at room temperature.  
*This includes: clear soups, sports drinks, black tea or coffee, clear juices, and any Jell-O that is not red.*
- Do not eat or drink anything after midnight on the day before your surgery.
- Do not drink alcohol or smoke cigarettes during the last 24 hours before your surgery.
- Plan to come to the hospital at least 2 hours before your surgery. Your surgeon's office will tell you the exact time to be there.

### ***Bowel Clean-Out***

Your surgeon may also ask you to have a bowel clean-out. For this, you may need a laxative drink, laxative pills, or an enema to help empty your bowel before surgery. You may also be asked to take some antibiotic pills before your surgery.



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# *The Day of Surgery*

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## **Arriving at the Hospital**

When you arrive at the hospital, go the Admitting Department. Once you are checked in, you will be given directions to the Preoperative Holding Area.

## **The Preoperative Holding Area**

Here, you will meet your surgical team.

- You will have an IV put in your arm. An IV is a soft flexible tube that you will get medicines and fluid through.
- Some patients will have an epidural catheter put in by their anesthesiologist. This catheter is put in the back with a small needle. It is an easy way to give pain medicine during surgery.



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# *The Day of Surgery*

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## **In the Operating Room**



In the operating room, the lights will be bright and the room temperature cool.

This is what you can expect:

- Your nurse will give you a warm blanket to make sure you are comfortable.
- Small paper sticky pads will be put on your chest. They are attached to a monitor so that your heart can be watched.
- A blood pressure cuff will be put on your arm. It will check your blood pressure every few minutes.
- A probe will be placed on your finger to check how much oxygen is in your blood.
- You will be given extra oxygen to breathe through a mask.

Your anesthesiologist will give you medicine through your IV. It will make you go into a deep sleep. Your nurse will be near you as you go to sleep.

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# *The Day of Surgery*

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## **The Surgery**

Once you are asleep, your surgeon will perform the operation that was discussed with you.

*Mass General's colon cancer surgeons follow guidelines to help avoid problems and make you as safe as possible!*

## **After Your Surgery**

When you wake up, your surgery will be over and a nurse will be taking care of you. The first thing you remember will probably be in the **PACU** or **P**ost **A**nesthesia **C**are **U**nit. You may have heard the PACU called the recovery room in the past.



Usually your family may come and see you in the PACU for a short visit.

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# *The Day of Surgery*

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## **In the PACU**

In the PACU, you may have many of the following:

- An oxygen mask or oxygen prongs that go in your nose
- An IV in your hand, arm, or neck
- An epidural catheter in your back
- A bladder catheter to drain your urine
- Inflating boots on your legs to prevent blood clots
- A heart monitor with sticky pads attached to your chest
- A blood pressure cuff on your arm to watch your blood pressure
- A probe attached to your finger to measure the oxygen in your blood
- A dressing over your incisions



Some patients will have a small tube in their nose. This tube goes down into the stomach and drains fluids and gas. It keeps the stomach from getting bloated after surgery. This tube helps patients heal.

Some patients may also have a drainage tube placed in their belly. This tube is connected to a suction bulb that you can see outside of your belly.

***Over the next 2-to-4 days, monitors and tubes will be removed. By the time you leave the hospital, you will probably not have any tubes.***

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# *Recovering from Surgery*

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## **Your Daily Goals Checklist**

While you are in the hospital, you will have daily goals to help you recover. These goals include:

- Getting out of bed and being active
- Eating and drinking
- Managing your pain

After surgery, you will be given a Daily Goals Checklist like the one on the next page. Use this checklist to see how you are doing each day.



## ***Your Daily Goals While in the Hospital: A Checklist for Colon Surgery Patients***

### **First Day After Surgery**

- Start a clear liquid diet
- Walk in the hallway 2-to-3 times
- Sit in a chair most of the day
- Cough and take deep breaths 10 times each hour
- Receive a shot to prevent blood clots
- Wear inflating boots when you are not walking

### **Second Day After Surgery**

- Drink at least 16 ounces of liquid
- Have your IV fluids shut off and your bladder catheter taken out
- Start taking pain pills instead of pain shots
- In between the narcotic pain medicine, take ketorolac, which is also called Toradol<sup>®</sup> or ibuprofen, which is also called Motrin<sup>®</sup>
- Walk in the hallway more than 3 times
- Sit in a chair when not walking
- Cough and take deep breaths 10 times each hour
- Receive a shot to prevent blood clots

### **Discharge**

You will be discharged when you are:

- Drinking all of the liquid your body needs without feeling sick
- Taking care of your pain with pain pills
- Getting out of bed and walking without help

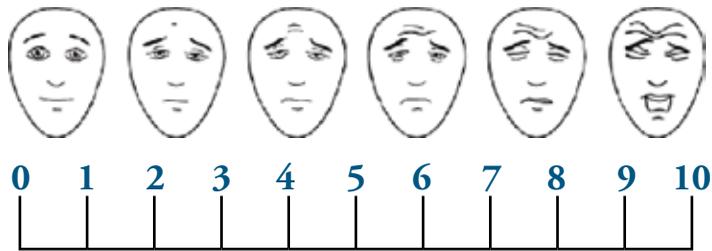
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## *Recovering from Surgery*

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### **Taking Care of Your Pain During Recovery**

During your recovery, our goal is to keep you as comfortable as possible. Most patients have some pain at their incision. This is normal. You will be asked to rate your pain on a scale from 1 to 10. Our goal is to keep your pain below 5.



You will be given enough pain medicine to help you rest and do important activities. This includes getting out of bed and walking to the bathroom or in the hallway.

#### ***What is PCA?***

Some patients control their own medicine with **P**atient **C**ontrolled **A**nalgesia or **PCA**. With PCA you press a small button attached to a pump on your IV pole. Pressing this button gives you a small dose of IV medicine.

# *Recovering from Surgery*

## **Problems After Surgery**

Most people who have colon cancer surgery recover without any problems. These people go home within 2-to-4 days. A small number of patients may have a slower recovery and need to stay a little longer.



### *Trouble Eating and Drinking*

The most common problem for patients is trouble with eating or drinking. They may also feel like they have to throw up.

Pain medicines and surgery can cause this. After surgery, food and drink may move slowly through your intestines. This gets better over time and usually does not last long.

### *Infection*

The second most common problem after surgery is infection. This is because the colon is not clean. There are germs in the colon which can spread to the area around it and cause an infection. In addition:

- Most patients have bladder catheters during surgery. These can increase the chance of urinary infections.
- Spending too much time in bed can sometimes lead to lung infections.

These infections do not happen often and are not usually serious. However, patients may get a fever and need antibiotics.

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## *Getting Ready for Discharge*

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### *Other Problems*

There are a few other problems that can happen after surgery. They are:

- Incomplete healing where part of the colon has been removed
- Heart problems or blood clots in the legs or in the lungs
- Allergies to medicines

These problems are very rare. They happen in less than 4% of all colon cancer surgeries. This means that less than 4 in 100 people will have one of these problems. When a problem does happen, our surgeons and nurses know how to take care of it.

### **When can I go home?**

You will be ready to go home when you are able to:

- Drink all of the liquids your body needs without feeling sick
- Take care of your pain with pain pills
- Get out of bed and walk without help



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## *Getting Ready for Discharge*

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### *How long will this take?*

You may be able to do these things as early as day 2 after surgery. It is important to share this information with the person who is taking you home. That way everything will be ready when you are.



Many people have been told that they have to move their bowels to be ready to go home. This is not true. You do not need to move your bowels before you go home.

### **Your Case Manager**

Your Case Manager works with your doctors, nurse, and other members of the care team. Together they will see what you need for discharge and make your discharge plan.

If you need help at home or a rehabilitation stay, your Care Coordinator will make these arrangements for you.

### *Rehabilitation Facility*

Most people will go home after the hospital. However, a small number will have a short stay in a rehabilitation facility.



To go to a rehabilitation facility your doctor must say that it is medically needed and your insurance company must say that they will pay for it.

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# Getting Ready for Discharge

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## Discharge Instructions

When you are ready to go home, your nurse or your surgeon will go over your discharge instructions. You will be given a written copy.



Your instructions will include:

- A list of your medicines with instructions about how to take them
- The reasons to call the surgeon's office
- The telephone number to call with questions



The instructions will also tell you how to take care of yourself including your incision, bathing, driving, and sexual activity. There will be information about your:



- Diet
- Activity
- Pain medicine
- Bowel movements



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## *At Home*

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### **What should I expect after discharge?**

When you get home, you may find that you get tired easily. Take a nap to help with this tiredness. You may also find that you are less hungry than usual. This is normal.



During this time your bowel movements may not be regular. Instead, they may happen more or less often than usual. You may also have them at different times of the day than you are used to. This may happen for some time.

### **When should I call my surgeon?**

When you are discharged, you will be given the telephone number to call if you are having any problems.



Call your surgeon for these danger signs:

- Throwing up or feeling like you have to throw up
- Fever greater than 100.5°F
- Pain in your belly or at your incision that is getting worse instead of better
- Redness or drainage around your incision
- Severe constipation or diarrhea
- Trouble urinating
- Lightheadedness

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## *At Home*

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### **We Are Here to Help...**

At Mass General Hospital, we understand what it means to have cancer. We know that cancer treatment can be difficult both physically and emotionally.

We are here to support you and your family. We offer many services including nutrition counseling, support groups, and therapies such as acupuncture and Reiki.



***Please let us know how we can help!***





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