

About Your Colectomy

How to prepare and what to expect

This handout explains a colectomy operation, including how to prepare for surgery, what to expect afterward, recovering in your hospital room, and precautions and self-care to speed your recovery at home.

What is a colectomy?

A *colectomy* is an operation to remove part of a large intestine (colon) that is damaged or diseased. During the operation, part of your intestine will be removed and the remaining pieces will be reconnected. This is called a *resection*.

Your doctor can do this operation in 2 ways:

- In **laparoscopic surgery**, several small incisions are made in your abdomen. Your abdomen is then filled with gas to lift your skin away from your organs so your doctor can see them clearly. Your doctor will use a camera and long, narrow instruments to do your operation through these incisions.
- In **open surgery**, one incision is made in the center of your abdomen. This is called a *midline incision*. It may extend both above and below your belly button. Your doctor will do your operation through this incision.

Your doctor will talk with you about which type of surgery is best for you.

How to Prepare

- **Aspirin and other medicines:** Do **not** take any aspirin or other products that affect blood clotting for 1 week before your operation. Two of these are ibuprofen (Advil, Motrin, and others) and naproxen (Aleve, Naprosyn, and others). See attached sheet for more information.



Your questions are important. Talk with your doctor if you have any questions about your colectomy.

- **Shaving:** Do **not** shave any part of your body that you do not already shave every day. If you normally shave near your surgery site, do **not** shave that area for 2 days (48 hours) before your surgery.
- **Hospital stay:** You will stay in the hospital for 3 to 5 days after your operation. When you go home, you will need someone to help you prepare food and do household chores for 1 to 2 weeks.
- **Coughing and deep breathing:** Your nurse will teach you coughing and deep-breathing exercises to help prevent pneumonia after surgery.
- **Lovenox for cancer patients:** Lovenox is a long-acting drug to thin your blood and keep clots from forming in your legs. Your nurse will teach you or a family member how to give yourself Lovenox shots. After your operation, you will get 1 shot every day for 28 days.

24 Hours Before Your Operation

- **Bowel preparation:** You may need to do a *bowel prep* before your operation. Follow the written instructions your nurse gave you.
- **Shower:** Take a shower the night before your operation.
 - Use the antibacterial soap your nurse gave you to wash your body from the neck down. Do **not** use the antibacterial soap on your face, hair, and private parts. (See directions that come with the soap.)
 - Wash your face, hair, and private parts with your own soap and shampoo.
 - Use clean towels to dry off, and put on clean clothes.
- **Arrival time:** The pre-surgery nurse will call you by 5 p.m. the night before your operation. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call 206.598.6334.

The pre-surgery nurse will tell you when to come to the hospital and will remind you:

- Which of your regular medicines to take or not take
- To sip only enough water to swallow your pills
- To drink 8 ounces of apple juice before midnight the night before your surgery
- To drink 8 ounces of apple juice 2 hours before your surgery

On the Day of Your Operation

Before You Leave Home

- Take a 2nd shower using the antibacterial soap the clinic nurse gave you. Follow the same instructions as were given for the 1st shower.

At the Hospital

- **Arrival:** Please arrive at the hospital at your assigned time.
- **Heating blanket:** To reduce your risk of infection, you will be covered with a heating blanket while you wait to go into the operating room. Please ask for a heating blanket if you do not receive one.

After Your Operation

Waking Up

You will wake up in the recovery room. You will feel sleepy.

You will have:

- An **intravenous tube** (IV) in your vein, which will be used to give you medicine for pain and nausea.
- **Sequential compression devices (SCDs)** on your legs to prevent blood clots. You will feel the SCDs inflate from time to time.
- An **epidural catheter** (tube) in your back to give you pain medicine.

You may also have:

- A **catheter tube** inserted into your bladder to drain your urine.

Recovering in Your Hospital Room

Incision Care

- If you had:
 - **Laparoscopic surgery**, your incisions will be closed with stitches under your skin. These stitches will dissolve on their own.
 - **Open surgery**, your midline incision will be closed with surgical staples. These staples will be removed in 10 to 14 days.
- To avoid putting stress on your abdomen, do **not** lift anything heavier than 10 pounds for 4 weeks after your operation. A gallon of water weighs a little more than 8 pounds.
- As you heal, there will be a thick healing ridge along your incision. This will soften and flatten out over several months.
- When you go home, you will need to check your incision every day. Call your doctor if you have any of the signs of infection listed on the last page of this handout.

Pain Medicine

- You will have control of your pain medicines with *patient controlled epidural analgesia* (PCEA). This is a device that allows you to push a button to give yourself a dose of pain medicine.

- Once you can handle a solid diet, your epidural catheter will be removed and you will take your pain medicine by mouth (oral).
- When you go home, use the pain medicine your doctor prescribed for you. It is important to take it before your pain is severe.

Nutrition

- In the pre-op area, you will receive fluids through your IV to keep you from getting dehydrated.
- As your intestines recover from your operation, you will pass gas. After this happens, you will be able to drink clear liquids.
- When you can drink clear liquids and not feel nauseated, your doctor will add regular foods back into your diet.

Activity

- You will become more active every day. Moving around is very important. It helps prevent pneumonia in your lungs and blood clots in your legs.
- Your nurse will help you stand and sit in a chair on the day of your operation.
- The day after your operation and every day until you are discharged:
 - We will encourage you to sit up in a chair for all of your meals.
 - Nurses and physical therapists will help you take 3 to 5 walks a day.
- The more you move, the faster your body will heal. Aim to be out of bed for 6 hours a day while you are in the hospital.

Breathing Exercises

Your nurse will:

- Help you do coughing and deep breathing exercises
- Have you use your incentive spirometer every hour that you are awake

Lovenox for Cancer Patients

If your colectomy is being done to treat cancer:

- During your hospital stay, a pharmacist will teach you about taking a medicine called Lovenox.
- After you go home, you will give yourself Lovenox shots. Your nurse will remind you how to do this before you leave the hospital.

Bowel Movements

- After your operation, it will be several days before you have your first bowel movement. Loose stools are normal at first.
- After you go home, your bowels may still be irregular. This is normal. But, call your nurse if you have:
 - Diarrhea that does not go away in 2 or 3 days
 - Nausea and/or vomiting
- Avoid getting constipated. Please read and follow the instructions in the handout “Constipation After Your Operation.”

Bladder Catheter

You may have a catheter in your bladder for 3 to 5 days after surgery. It will be removed when you can get up and use the bathroom.

Precautions and Self-care to Speed Your Recovery

Shower

- You may shower every day.
- Do not take a bath, sit in a hot tub, or swim until your incisions are healed. This will take about 4 weeks.

Lovenox Shots

If you were given Lovenox shots while you were in the hospital, continue your shots at home for 28 days after your operation.

Exercise

- Walking every day will help speed your recovery. Slowly increase how far you walk.
- Do not lift anything that weighs more than 10 pounds for 4 weeks after your operation. A gallon of water weighs a little more than 8 pounds.
- For the first 3 weeks you are home, avoid any activity that puts stress on your abdominal muscles or increases your heart rate. This includes gardening, vacuuming, and other household chores.
- You may resume sexual activity when it is comfortable and desirable. If you have any questions, talk with your doctor or nurse.

Return to Work

How much time you take off work depends on what you do for a living. Most people take 2 weeks to 1 month off to recover after their operation.

Return to work when you feel ready. Some patients choose to start back part-time and work shorter days, then work more as their energy allows.

First Follow-up Visit

At your first clinic visit after your operation, your nurse and doctor will:

- Talk with you about how you are doing at home
- Ask how your appetite is and how your bowels are working
- Check your incision(s)
- Remove your surgical staples (for open surgeries)
- Ask how your pain is and what pain medicines you are taking
- Ask what activities you are doing, and when you plan to return to work
- Review your pathology report with you

When to Call

Call your doctor or clinic at one of the numbers below under “Who to Call” if you have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Any sign of infection in your incision:
 - Redness
 - Increasing pain
 - Swelling
 - Foul-smelling drainage
 - A change in the type or amount of drainage
- Nausea and/or vomiting
- Concerns that cannot wait until your follow-up visit

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

From 8 a.m. to 5 p.m., call:

Surgical Specialties Clinic:
206.598.4477

SCCA Surgical Oncology
Clinic: 206.288.7555

After hours and on holidays
and weekends, call
206.598.6190 and ask for the
resident on call for your
doctor to be paged.

Who to Call

During clinic hours, 8 a.m. to 5 p.m., call:

- Surgical Specialties Clinic: 206.598.4477
- SCCA Surgical Oncology Clinic: 206.288.7555

After hours and on holidays and weekends, call:

- 206.598.6190 and ask for the resident on call for your doctor to be paged