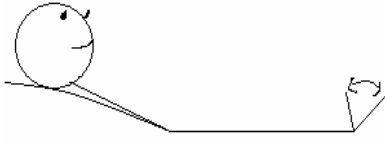


Rest in Bed Exercises After Your Operation

These exercises should be commenced as soon as you wake up on the day of your operation.

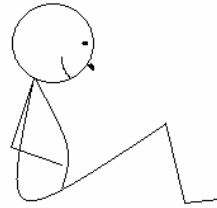
1. Exercises for Circulation

- Bend feet up and down. Repeat 10 times every hour.
- Circle feet in as large a circle as possible. Repeat 10 times every hour.
- Bend one knee upwards, keeping the heel on the bed, slide it down again, repeat with the other. Repeat 5 times every hour.
- With your legs straight, stiffen your legs and tighten your bottom, hold for a count of 5 and then relax. Repeat 5 times every hour.



2. Breathing and Coughing

- Deep breathing: When sitting or lying, place your hands on the sides of your lower ribs. Breathe deeply making sure your ribs move under your hands. Relax, and breathe out slowly. Repeat 5 times every hour.
- Huffing to assist coughing: Breathe deeply and huff on outward breath. Repeat twice every hour.
- Coughing: With abdominal operations, support wound firmly with hands or pillow. Breathe in deeply and cough. Repeat once every hour.



Discharge Advice

Eating and Drinking: Eat and drink normally, maintain regular bowel habits by keeping well hydrated and maintaining dietary fibre.

Pain management: Take pain relief medication as recommended / as required.

If you experience: severe pain not helped with the medication provide, eg Panadol®; fever; a wound with any of the following signs of infection; red appearance, hot and tender to touch with swelling or leaking fluid.



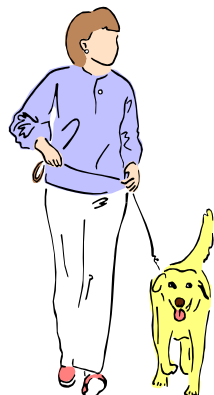
Please contact one of the following

- **Your General Practitioner (GP).**
- **Your surgeons rooms (Lister house).**
- **After hours service GP service (number 1800 641 395).**
- **Present to emergency department .**

Activity After Discharge

Around the House You should gradually return to normal activities. It is important to include walking in your regular routine, at least one kilometre per day. Elevate your leg when sitting down. Avoid standing still for long periods.

Return to work This depends on the type of work that you do. It is important not to be standing stationary for any extended periods of time. It is usually two or three weeks before you can return to work.



Disclaimer: This patient pathway is intended as a guide only. As each patient is an individual and responds differently, the care plan may alter. If you have questions, please discuss with your Doctor or Nurse.



PATIENT PATHWAY FOR VARICOSE VEIN SURGERY

INFORMATION FOR YOU . . .

The following information will be discussed with you in the Pre-Admission Clinic.

Date of Admission to Hospital:
You will need to telephone the Day Procedure Unit on (03) 5381 9265 between 1.00 p.m. and 3.00 p. m.

You will need to stop eating and drinking 6 hours before your admission time. You may have a couple of sips of water up until 2 hours before your admission.

You will need to shower at home on the morning of your operation.

You will need to remove all jewellery (your wedding ring may be left on).

BEFORE YOUR SURGERY YOU NEED TO TAKE:

Pick up anti-embolism stockings from Pre Admission

Your own medication/s: to be taken with a sip of water on the morning of your operation, unless advised.

Blood Test to be Done:

Date:

At:

Before:

When you come into hospital bring your:

- Anti-embolism stockings
- Own medications (tablets / drops / inhalers) you are taking. These will be continued whilst you are in hospital.
- Eye glasses and / or hearing aids if you use them.
- Toiletries, night clothes (1-2 changes).
- Do **not** bring a large amount of money, jewellery or valuables.

Admission / Discharge Arrangements:

- Please come to Hospital Reception at your admission time.
- You will be expected to stay in hospital for 1 night after your surgery. Discharge time is 10.00 a.m.
- Before you come into hospital please make arrangements for someone to drive you home on your discharge.

Your Health Care Team

Your Surgeon: Mr Kitchen or Mr Campbell

Resident Doctor:

YOUR CHECK LIST . . .

The following checklist is to assist you in preparing for your admission to Hospital.

Confirm Admission by phoning 5381 9265 the day before your operation:

Date: Time:

Confirm Fasting Time

Nothing to eat or drink from: Time:

Shower at home on the morning of your operation: no powder, no deodorant, no make-up, no nail polish. Wedding ring ONLY.

Your own medication/s: taken as directed

Do not take your:

Blood Test

Attended to as directed

Do you have your:

- Anti-embolism stockings
- Own medications
- Eye glasses and / or hearing aids
- Patient Pathway (this document)
- Toiletries, night clothes

Admission / Discharge Arrangements:

- Arrangement made for family / friend to take you home on discharge from hospital.
- Present to Hospital Reception on your arrival at the hospital.







General Practitioner:

Lister House Clinic 53820011

Yandilla Ward 5381 9255 (leave message)

Oxley Ward 5381 9258

	At Pre-Admission	Day of-Admission / Surgery	Discharge day - Day 1
Treatment and Observations 	You will: <ul style="list-style-type: none"> be assessed by a doctor for the anaesthetic have your blood and urine tested have an electrocardiograph (ECG) only if required have your blood pressure, pulse, oxygen levels and weight measured. Have your leg measured for anti-embolism stockings 	<ul style="list-style-type: none"> You will be admitted to the Day Procedure Unit and transferred to a ward after your operation. The surgeon will mark the operation site. Your surgery will take at least 1—3 hours from when you go into theatre. You will be seen by the Anaesthetist. You may have a drip in a vein to give you fluids and medications if required. 	You will: <ul style="list-style-type: none"> have your blood pressure, temperature and pulse measured 4 times a day be visited by your doctor
Medication 	Pre-Admission Clinic staff will: <ul style="list-style-type: none"> review your current medication discuss anaesthesia. 	<ul style="list-style-type: none"> Before surgery you may be given medication to help you relax. You may have a general or spinal anaesthetic, depending on what your anaesthetist feels is most appropriate. It is important that you tell the nurses if you have pain, so you can be given pain relief. You <u>may</u> have a small injection to thin your blood and prevent blood clots each day while you are in hospital. 	You will: <ul style="list-style-type: none"> Need regular oral pain relief; you leg will be sore.
Nutrition 	<ul style="list-style-type: none"> You will be instructed to have nothing to eat or drink for 6 hours before your surgery. You may take sips of water up until 2 hours before admission to hospital. 	You will be: <ul style="list-style-type: none"> able to have ice chips after your operation and sips of fluid as you feel up to it, building up to free fluid intake and light diet. given medication to stop vomiting / nausea if required. 	<ul style="list-style-type: none"> It is not unusual to feel sick for a day or two after surgery. Tell the nurse if this happens so you can have medication to stop it. Normal fluid intake and a light diet is usually commenced on the day after your operation.
Mobility		You will: <ul style="list-style-type: none"> rest in bed until the anaesthetic has worn off be encouraged to get out of bed and move as soon as it is safe and you feel able. This will decrease the risk of blood clots Be encouraged to do exercises for circulation and lungs (see back page of this brochure). 	<ul style="list-style-type: none"> You will be able to walk short distances, which you may slowly increase as you feel fit. Do not forget to do your deep breathing coughing and leg exercises.
Personal Care	You will be advised: <ul style="list-style-type: none"> in regard to showering before your operation. to give up smoking before the operation. This is to help reduce any risks association with smoking. 	<ul style="list-style-type: none"> Shower at home before admission to hospital. After your operation you will be given a wash in bed, this usually makes you feel much better. A firm bandage will be on the operated leg A firm stocking (TED stocking) will be put on your non-operated leg before your operation to reduce the risk of blood clots. 	<ul style="list-style-type: none"> You may have a wash, nursing staff will assist you
Wound Care 	Wound care will be discussed with you. <ul style="list-style-type: none"> Leg/s will be bandaged when you return from theatre. You may have an incision in your groin. The groin dressing will be removed and left open before you go home. 	<ul style="list-style-type: none"> You will have firm bandages on your operated leg. This bandage will be checked by nursing staff for ooze. Nursing staff will also check the circulation to your feet. <u>Advise staff if you feel the bandages are too tight.</u> 	<ul style="list-style-type: none"> Keep your leg elevated when not walking. Do not stand still. The incision in your groin <u>should not</u> have any dressing in place when you go home. This helps prevent infection. Leg bandage will be removed and anti-embolism stockings used.
Discharge and Education	The nurse will: <ul style="list-style-type: none"> discuss the length of stay in hospital (usually overnight). discuss plans for your discharge give you information on what to expect after surgery. 		Nursing staff will: <ul style="list-style-type: none"> Make an appointment for removal of sutures with Lister House Nurse and Surgeon. (7-10 days post-op). This can be done by your local health centre if you live away from Horsham. Discharge time is 10 am. It is important to have someone arranged to pick you up.

Varicose vein surgery

Major superficial veins (long or short saphenous veins) that are varicose can be treated surgically. Generally numerous small incisions are used to access the vein rather than one large cut. Depending on the location of the varicose vein the incisions may be in the groin or behind the knee.

Surgical techniques used include:

Ligation and stripping—the vein is cut and tied off (ligation). Stripping the vein involves inserting a slender instrument into the vein through a small incision. The vein is then pulled out through a second incision.

Phlebectomy—small incisions are made, and the veins removed with a special hook.

Once the superficial vein has been removed the blood is redirected to deeper veins in the muscles of the leg.

Immediately after the operation, you can expect:

- Bandaging on the leg/s, to reduce bleeding and bruising
- Pain-killing medication given initially by injection
- You will be encouraged to walk as soon as possible, so that blood flow can return to normal. Walking helps to prevent complications.
- A hospital stay is usually overnight only, unusually two nights.

Common side effects of surgery

Some of the common side effects of varicose vein surgery include:

- Swelling, which may take a few weeks to subside. The feet and ankles are particularly prone.
- Scarring, although scars tend to be less noticeable than varicose veins and fade with time.
- Brown staining of the skin may occur, but tends to fade with time.
- The skin and calf muscle may be painful, swollen and bruised.
- Unintentional injuries to nerves may cause patches of numbness or 'pins and needles'. These patches may recover in time (up to two years in some cases) or they may be permanent.

Possible Complications following surgery

Varicose vein surgery is considered to be safe, but all surgery carries some degree of risk. Possible complications may include:

- Infection, particularly if skin ulcers were present.
- Blood clots forming within deep veins.
- Bleeding or bruising.

Taking care of yourself at home

Be guided by your doctor, but general self-care suggestions include:

- Allow for two to four weeks off work following surgery, (depending on the amount of standing you do at work).
- Apply anti-embolism stocking during day only, remove at bed time. Continue anti-embolism stocking use for a minimum of 4 weeks.
- The dressing to the groin should be left open. Dry well if it becomes wet.
- You will be able to shower, however, ensure wounds are completely dry before applying stockings (can use hair dryer)
- Elevate your leg when sitting, the foot of your bed may be elevated too (suggest putting 2 pillows under the mattress)
- Walk for at least half an hour each day. This is to prevent complications such as blood clots—do not stand still.
- Avoid standing still, or sitting with your legs crossed

Suture Removal

- Your stitches will be removed by the nurse at Lister House surgery.
- It is recommended that you take a mild analgesia (such as Panadol® or Panadeine®) before coming to the clinic for suture removal and have someone drive you.**

Long term outlook

You will need to have a check-up with your general practitioner a few weeks after surgery. About 20 percent of people who undergo varicose vein surgery will develop new crops of varicose veins given time. It is important that you not drive until your leg is comfortable and you can safely use your leg.

(Elements of the material above have been adapted from an article from the Better Health Channel website, www.betterhealth.vic.gov.au).