

ENHANCED RECOVERY AFTER GROIN DISSECTION SURGERY

ERAS



**PATIENT
EDUCATION**

Contact Information for Questions and Emergencies

GI Surgery Center: **716-845-4005**

Hours: 8a.m. – 5p.m., Mon - Fri

- General Questions: If the Center is closed, your call will be answered by a staff member of the nurse triage line or the central call center, and they will assist you.
- Urgent Symptoms: Roswell Park has an **Assessment and Treatment Center (ATC)**, which sees patients who are having urgent symptoms that are not life-threatening. **This is not a walk-in clinic.** You must have a referral from your Roswell Park physician or the physician on call to be seen in the ATC. Please call **716-845-4005** if you need assistance. If you need to be seen, they will arrange an appointment in the ATC.
- Emergencies: In an emergency, please call 911 or go to the nearest hospital emergency department. Bring your Roswell Park “green card” (ID card) with you and let the ER staff know the last time you were treated at Roswell Park. If you go to the ER or are admitted to the hospital, have someone notify your Roswell physician.

Introduction

This booklet explains the Roswell Park Cancer Institute's *Enhanced Recovery After Surgery* (ERAS) program for people having groin lymph node dissection surgery. The overall goal of this program is to shorten your recovery after surgery by:

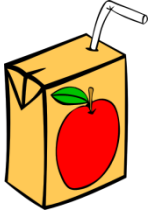



- (1) reducing the length of your hospital stay
- (2) avoiding the use of medications (such as opioids) which may delay your recovery
- (3) lowering your risk of complications after surgery




Successful ERAS starts **before** the operation with medications and other therapies aimed at giving you a head-start on your recovery.


About ERAS


- **Preparation:** You are about to have a major operation. Good nutrition and physical fitness are important to a smooth and shortened recovery after surgery. Eating a healthy diet of fruits, vegetables, and proteins can help maintain a healthy weight. If you smoke, stop as soon as possible. Roswell Park has programs to help you quit. Daily exercise is a great way to improve your conditioning before an operation. Even a 30 minute walk every other day is valuable.
- **Night before surgery:** Patients on the ERAS plan are encouraged to have a regular diet on the evening prior to surgery. **Do not eat or drink after midnight.**
- **Day of surgery:** Several long-acting pain pills are given before surgery to help control pain after surgery. These are not opioid (narcotic) medications. You will need to drink 8 ounces of apple juice 2 hours before your surgery.
- **After surgery:**
 - Pain control: It is normal to be sore after surgery, and to have a pain score of 1-3. Our goal is to control your pain using as little opioid medication as possible. Other medications that are used include anti-inflammatory medications, neuropathic medications, and acetaminophen (Tylenol®). Pills you can take by mouth are preferred over intravenous (IV) medications. If you have pain that is not treated, you will not want to get out of bed and walk which puts you at higher risk for complications.
 - Early ambulation (sitting up in a chair and walking) is important to a quick recovery after surgery. Studies have shown that the earlier a patient is up and moving, the less likely they are to have postoperative complications such as a blood clot and pneumonia.

Groin Lymph Node Dissection - ERAS Care Plan

	Before Surgery	Immediately After Surgery	Day 1 After Surgery	Day 2 After Surgery	Day 3 After Surgery	Day 4 After Surgery	Day 5 After Surgery
Food and Drink 	<ul style="list-style-type: none"> You will have an 8 ounce apple juice 2 hours prior to the start of surgery 	<ul style="list-style-type: none"> You will be started on a regular diet which will be continued during your stay 					
Comfort  Your pain goal: _____	<ul style="list-style-type: none"> Oral pain medication before surgery 	<ul style="list-style-type: none"> You will be given scheduled non-narcotic pain medications to prevent and reduce pain such as Tylenol® or NSAIDs (i.e. ibuprofen or Ketorolac) If you have further pain, additional medication can be given, including in your IV 				<ul style="list-style-type: none"> By Day 4 after surgery, your IV pain medications will be discontinued 	
		<ul style="list-style-type: none"> Tell your nurse if your pain is increasing or if the pain medicine is not working 					
Breathing 	<ul style="list-style-type: none"> You will be given an incentive spirometer so you can practice your breathing exercises Stop smoking 	<ul style="list-style-type: none"> Take deep breaths and cough often - splinting may make more comfortable. To splint, hold a pillow over your incision Use your spirometer every hour when you are awake The night of your surgery, we may give you extra oxygen by placing a lightweight tube under your nose (nasal cannula) We will check the monitor and when the oxygen level in your blood is OK, we will remove the cannula 					

	Before Surgery	Immediately After Surgery	Day 1 After Surgery	Day 2 After Surgery	Day 3 After Surgery	Day 4 After Surgery	Day 5 After Surgery
Activity 	<ul style="list-style-type: none"> Stay active by walking 30 minutes every other day, if you can 	<ul style="list-style-type: none"> Your nurse will help you stand up and sit in a chair The sooner you are up and moving, the faster your recovery 	<ul style="list-style-type: none"> You may take a shower You may meet with a physical therapist to help regain your strength Spend most of the day out of bed and moving Walking will increase each day. We will assist you, if needed Walk 1 ___ Walk 2 ___ Walk 3 ___ Walk 4 ___ Walk 5 ___ <p style="text-align: center;">27 laps = 1 mile!</p>				
Bladder/Bowel 	<ul style="list-style-type: none"> While you are asleep in surgery, a catheter (a small flexible tube) is placed in your bladder to drain your urine 	<ul style="list-style-type: none"> The catheter will remain Your nurses will help you to the bathroom if you need to have a bowel movement 	<ul style="list-style-type: none"> We will remove the catheter from your bladder once you are able to walk around 				
Tests and Procedures 	<ul style="list-style-type: none"> We will give you fluids and medications through your IV While in bed, you will wear sequential compression devices (SCDs). These sleeves wrap around and gently squeeze your legs to help prevent blood clots If you can tolerate enough food, we will stop your IV fluids 						

	Before Surgery	Immediately After Surgery	Day 1 After Surgery	Day 2 After	Day 3 After	Day 4 After	Day 5 After
Education 	<ul style="list-style-type: none"> • We will teach you how to inject yourself with a medication to prevent blood clots (Lovenox®) • You will be given a dose of blood thinner before your surgery • We will teach you how to care for the drains you will have after surgery 	<ul style="list-style-type: none"> • Breathing and leg exercises • Safety and fall prevention • Good nutrition is important to recovery, a registered dietitian (RD) may meet with you • Stoma teaching if applicable, dedicated Stoma Nurses will assist you 	<ul style="list-style-type: none"> • You will be given a medication to prevent blood clots • Ask the nurse any questions you have about the medication and how to administer it • Watch how the nursing staff empties your drain(s) 	<ul style="list-style-type: none"> • We will teach you how to inject yourself with a medication to prevent blood clots (enoxaparin/Lovenox®) • You will have to demonstrate to the nursing staff that you (or a family member) can administer the medication • We will teach you how to empty your drains 			

	Before Surgery	Immediately After Surgery	Day 1 After Surgery	Day 2 After	Day 3 After	Day 4 After	Day 5 After
Plans for Leaving the Hospital (Discharge) 	Plan for a 4 to 5 day hospital stay		<ul style="list-style-type: none"> You and your nurse should start talking about discharge plans Tell your nurse who will be your caregiver/ support person when you get home. <p>You will be assessed by a physical therapist prior to discharge who will determine if you require any aids for stability like a cane or walker</p>				<ul style="list-style-type: none"> A dedicated discharge planner will discuss discharge plans Your nurse or pharmacist will discuss your at-home medications Are you ready for discharge? <ul style="list-style-type: none"> ✓ Pain is under control ✓ You are eating ✓ You are walking (with or without help) ✓ You are not having problems with urination or bowel movements ✓ You can administer the blood thinner ✓ You know how to take care of your drain(s) ✓ You understand how to take care of yourself at home



Elm & Carlton Streets | Buffalo, New York 14263
www.RoswellPark.org
1-800-ROSWELL (1-800-767-9355)