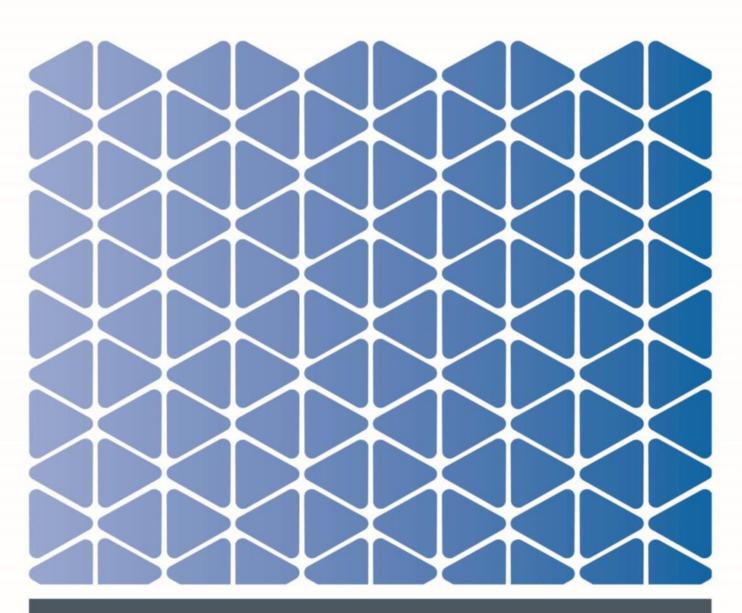




PATIENT INFORMATION

DAY SURGERY PATIENT DISCHARGE INFORMATION







Recovering from a General Anaesthetic

The general anaesthetic that you have had can remain in your system for up to 24 hours. Therefore, please ensure you are accompanied by a responsible adult over the age of 18 following your surgery.

For at least 24 hours after your operation, please do not:

- Drive.
- Drink any alcohol.
- Take sleeping tablets.
- Operate heavy machinery.
- Lock yourself in the bathroom/toilet, or make yourself inaccessible to the person looking after you
- Make important decisions or sign legal documents.

Do:

- · Drink fluid and eat a light diet.
- Take it easy on the day of the operation, longer if recommended.
- Take time off work if advised to do so.
- Follow wound care instructions given by your discharging nurse.
- Take any prescribed medication. Please confirm instructions for any anticoagulants (blood thinners) with your nurse before discharge.

Recovering from a Spinal Anaesthetic

Before you are discharged, the nurse looking after you will make sure that you:

- Have normal sensation in your legs and buttocks.
- Are able to straight leg raise off the bed.
- Are able to stand and mobilise with no ill effect.
- Are able to pass urine normally.

When home you should take any painkillers prescribed as necessary.

Recovering from Your Surgery

Please Note: These are routine instructions. Please follow the specific information documented in your information booklet and given to you by your discharging nurse.

Medication

Please continue your regular medication unless advised not to by your nurse or doctor.

Most surgical wounds will cause some discomfort initially and this may last for a few days. Paracetamol and/or Ibuprofen should usually be sufficient to manage any pain you may experience; these can be obtained over the counter from your local pharmacy or supermarket. Please take them as instructed on the medicines information leaflet included in the box.

If your doctors think that you may require any extra pain relief or additional medication to aid your recovery, these will have been given to you by your discharging nurse and recorded in your discharge advice booklet. Please take them as prescribed on the box/bottle. Take care not exceed the stated dose.

You will need to obtain repeat prescriptions from your GP surgery, should you require them. It is important to take medication regularly, as directed, to keep your pain controlled.

Last Medication

Below is a list of medication you have had during your admission and when you will be able to take your next dose.

Medication	Last dose	Next dose

Wound Care

Following most surgical procedures there will be a surgical wound. Surgical wounds can be closed with any of the following:

- Glue.
- Dissolvable Stitches These do not need to be removed, and will dissolve in 10-14 days.
- Non-dissolvable Stitches -These will need to be removed at your GP practice by the practice nurse or at a follow up appointment with a member of the surgical team.

All wounds are covered with a surgical dressing to keep the wound clean and prevent infection. Please keep your wound dry for 24-48 hours, unless told otherwise by your discharging nurse. After this time, you may shower or bathe, but do not soak in the bath for long periods or aim the shower directly at your wound. After showering/bathing, remove any wet dressing and pat the wound dry (do not rub the wound). Following your bath or shower you can either leave the wound exposed, or if it is rubbing on your clothes, apply a new dressing.

If your wound starts to bleed, apply pressure with a clean dressing, towel or cloth handkerchief for 15-20 minutes. If this does not stop the bleeding or you have any signs of infection, please seek advice from the Day Surgery Unit (Tel: 01562 512356) or attend your nearest walk in centre or emergency department.

Signs that your wound may be infected:

- The skin around your wound is red, sore, hot and swollen.
- Your wound has liquid (often green or yellow pus) coming out of it.
- Your wound opens.
- You feel generally unwell or have a temperature (fever).

Your wound has been closed with	Glue/absorbable/non-absorbable suture	es
Your sutures do/do not require removal on Your dressing is	on / / By Waterproof / not waterproof	
You do/do not need your wound redressed on	ed / / By	
Please remove your dressing on	/ /	
If you have a drain this will be removed on	n / / By	

The person responsible for monitoring your drain is
You can contact them on

Mobility

It is advised for you to mobilise as much as you are able.

You will be informed of any restrictions or instructions regarding your mobility prior to discharge.

If you have been advised to wear compression stockings, please follow the instructions given to you by your discharging Nurse.

Please wear your anti embolic stockings day/night for

weeks/months.

Prevention of DVT and PE

When you have recently been discharged from hospital after surgery you are at more risk of developing blood clots that can form in your body. They are commonly known as a Deep Vein Thrombosis (DVT) or Pulmonary Embolism (PE)

- DVT commonly presents with a swollen and painful leg. The leg can also be red and warm to touch. It rarely affects both legs.
- PE commonly presents with chest pain which is often worse when taking a deep breath. It can also cause shortness of breath, a fast heart rate and coughing up blood.

You should seek urgent medical attention from your GP or local emergency department if you have any of these symptoms. If you are unwell you should call 111 or 999 in an emergency.

Follow up appointment

You **do/do not** need to see the consultant or their team again.

This appointment will be sent to you in the post for.......weeks/months.

If you have had a **biopsy** taken, you will receive a written letter with the results.

Advice MUST be sought if you have any of the following symptoms following your surgery.

- Bleeding from wound site which is more than expected.
- Swelling or discolouration of the skin around your wound.
- Swelling in any limbs, especially if it is hot to touch.
- Shortness of breath.
- Chest pain.

If you experience any of the above symptoms, please call 111 or attend your nearest accident and emergency.

You can also contact Ward One on :01562 826350 / 01562 512356 Monday to Friday 24 hours a day.

If you require speciality advice, or need advice outside of Ward One hours, you can also contact:

General Surgery - Ward 18 (Alexandra Hospital) - 01527 512106

Urology Surgery - Ward 10 (Alexandra Hospital) - 01527 512101

Orthopaedic Surgery - Ward 16 (Alexandra Hospital)- 01527 512104

Emergency Gynaecology Assessment Unit (WRH) - 01905 761489

Ophthalmology (Eyes) - 01527 507915 (09:00- 17:00) OR 111

Eye patients can also contact **Birmingham Eye Hospital** for advice on 0121 507 4440

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Advice after a day case spinal anaesthetic

Most patients experience no problems after their spinal anaesthetic and its effects usually ware off after 2 to 4hours (depending upon which local anaesthetic drug was used). However, very rarely, serious complications can occur after you have been discharged home from hospital.

Urgent treatment of these rare complications is necessary to prevent permanent injury.

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Therefore, if you experience any of the following symptoms in the next few days please seek urgent medical advice by contacting your local hospital, using the telephone numbers below.

SYMPTOMS TO BE CONCERNED ABOUT AFTER YOU HAVE HAD A SPINAL ANAESTHETIC

- Redness, pus, tenderness or pain at the spinal injection site
- High temperature, neck stiffness
- Feeling generally unwell
- · New and severe back pain
- New weakness, numbness or new loss of sensation in your legs
- New loss of bladder or bowel control
- Continuous headache, worse on standing, not relieved by simple pain relief.

Alexandra Hospital, Redditch (Hospital switchboard 01527 503030)

- Working hours (8am-4pm, Monday-Friday); Telephone the hospital switch board and ask them to bleep the Acute Pain Nurse (Bleep number 1266)
- Outside of these hours please contact Worcestershire Royal Hospital as below

Worcestershire Royal Hospital, Worcester (Hospital switchboard 10905 763333)

- Working hours (8am-4pm, Monday-Friday); Telephone the hospital switch board and ask them to bleep the Acute Pain Nurse (Bleep number 238)
- Outside of working hours or if Acute Pain nurse is unavailable: Telephone the hospital switchboard and ask them to bleep the oncall anaesthetist (bleep number 700)

If you are experiencing high fevers or neck stiffness, or feel very unwell, please seek urgent medical attention at your nearest Accident & Emergency Department and inform them that you have recently had a spinal anaesthetic.

Advice following a peripheral nerve block injection

Regional anaesthesia involves injection(s) of local anaesthetic to block certain nerves or groups of nerves in order to 'numb' a part of your body. It is often used in conjunction with general anesthesia and alongside other forms of analgesia to help keep you pain free after your operation. The effects of the local anaesthetic used should gradually wear off over 1 to 36hours, depending upon the type of local anaesthetic used. It is important that you take regular painkillers at the prescribed times because as the block begins to wear off feeling can return quickly.

While your limb is weak or numb you must take care to protect it – consider using a sling or splint to support it and take care to avoid any pressure areas, sources of heat or cold.

Rarely serious complications can occur following nerve block injections. Therefore, please seek medical advice from your local hospital using the telephone numbers above if:

- The effect of the nerve block is lasting LONGER than expected (>48hours after a nerve block injection)
- You experience NEW ONSET neurological deficits after your original nerve block has worn off (numbness/tingling, weakness, unexplained excessive pain)

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.