

Enhanced Recovery After Surgery (ERAS)

Division of Gynecologic Oncology

Patient Education

Patients undergoing gynecologic and gynecologic oncology procedures can have prolonged recovery in the critical period after surgery and prior to discharge from the hospital. The significant factors that traditionally influence recovery in this period include postoperative pain control, fluid management, and return of bowel function.

Enhanced Recovery After Surgery (ERAS**)** protocols are designed to address these issues and help you recover faster and more comfortably. These protocols have been studied in many hospitals and are shown to improve surgical outcomes, decrease hospital length of stay, and improve patient satisfaction. Our protocol is designed with the help of your surgeon, anesthesiologist, care team and nurses to provide you with the best care.

Key Components of the Protocol:

Before Surgery:

- Patient education
- Going into surgery as healthy as possible (e.g. increase activity/exercise, stop smoking)
- Decreasing the amount of time you go without eating
- Start pain control before the surgery takes place

During Surgery:

- Using many types of medications to control pain and give a reasonable amount of intravenous fluid to keep you hydrated
- Minimally invasive surgery

After Surgery:

- Getting out of bed and walking early and often
- Allowing you to eat as soon as safely possible
- Avoiding excessive intravenous fluid
- Controlling your pain using different types of medications in addition to narcotics
- Good pain control with oral medications
- Eating and drinking without difficulty or nausea
- The ability to walk and move around safely
- Having good support to help you at home

PATIENT CHECKLIST: AFTER PRE-OP VISIT AND PRIOR TO SURGERY (1/4)**I. Necessary Appointments before Surgery**

- Preadmission testing
 - Routine pre-operative labs
 - Chest X-ray if history of cardiopulmonary disease
- Appointment with Primary Care Physician or Cardiologist for medical clearance (if requested by your surgeon)

II. Prescriptions/Instructions before Surgery

- Pick up 20 oz of non-red Gatorade or Powerade for the day of surgery
- Pick up laxative bowel prep if ordered by your surgeon
- Discuss holding NSAIDs (eg. Ibuprofen and naproxen), Aspirin and/or Plavix for 7 days with your surgeon
- Discuss with your cardiologist about holding your Coumadin or other anticoagulation medication before surgery
- Continue regular diet unless instructed otherwise by your surgery team
- Refrain from smoking
- Continue your normal activity routine until day of Surgery

PATIENT CHECKLIST: DAY PRIOR TO SURGERY (2/4)

I. Day before Surgery

- You may eat breakfast, lunch, and have soup for dinner (No creamy soups)
- Drink only clear liquids after 6:00 pm. You may continue to drink clear liquids up until 2 hours before you are scheduled to arrive at the hospital for your surgery.
- Bowel Prep: per instructions of your surgeon
- Call OR for surgery time if not contacted by 5pm
- Bring CPAP machine to hospital (if you use one)

PATIENT CHECKLIST: DAY OF OPERATION (3/4)

I. Day of Operation and Preoperative Holding Area

- The morning of the surgery, drink a 20oz Gatorade or Powerade. This drink must be finished 2 hours before the time you are scheduled to arrive at the hospital
- Take your medications as instructed by the surgery team

PATIENT CHECKLIST: DAY OF DISCHARGE (4/4)

I. Day of Discharge from Hospital

- Education for care of your incision(s)
- Education of the medications for pain and any others prescribed
- You will be eating and drinking a regular diet
- Continue to walk
- If you have staples in your wound, they will be removed during your postoperative visit usually between 10-14 days

