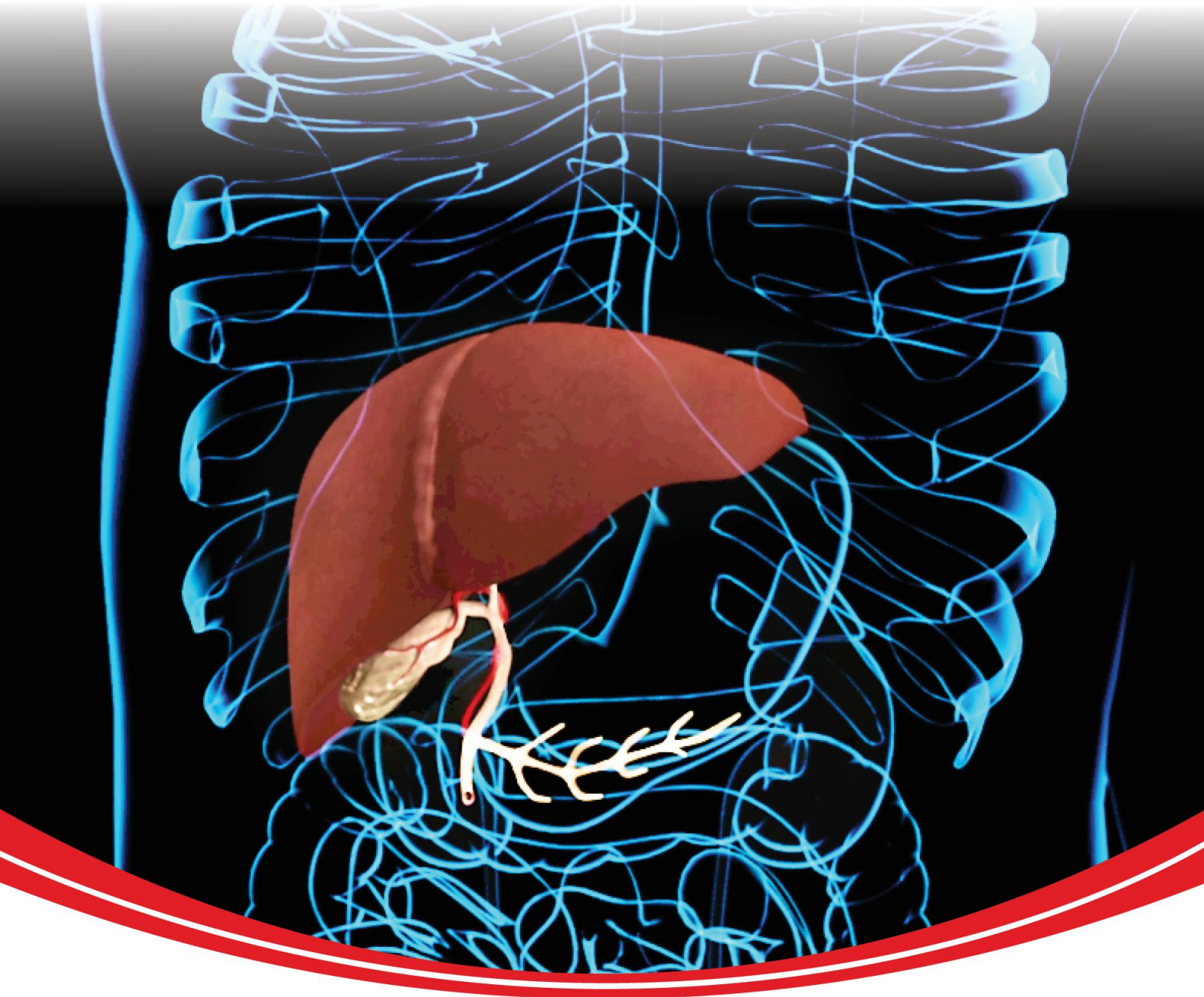


Laparoscopic Cholecystectomy

Patient Information



What is the gall bladder?

The gall bladder is an organ situated under the liver that is responsible for the storage and concentration of bile, which is fluid produced by the liver which helps in digestion.

What is laparoscopic surgery?

Laparoscopic surgery, also referred to as minimally invasive surgery, is a surgical procedure performed using a video camera and several slim instruments which are used after making small incisions in the body. The operation is performed under General Anaesthesia.

Preparing for your surgery

After you decide to go ahead with your surgery, you will be asked to sign an informed consent form. This form will include details of the surgery which will be explained to you by your surgeon.

Your pre-operative nurse will help you get familiarised with the surgery specific preparations, including the usage of energy drinks, bowel preparation (if required), fasting status, and will also guide you in detail about the process from admission till discharge.

Before your surgery, you will be asked to visit the anaesthesia clinic for pre-operative assessment. Here, you may be asked to undergo some pre-operative tests including blood tests, ECG and radiology workup as per the requirement.

At the anaesthesia clinic you will be asked to sign another informed consent form for anaesthetic drugs administration during your surgery.

After getting a go-ahead from the anaesthesia clinic for your surgery, you will need to contact our financial counsellor corporate officer for an estimate of your surgery cost and the arrangement of a bed on the required date.

For any assistance during this process you can call our Admissions Office on 021-34862002 or 021-34862003.

Please note that you may receive a confirmation call from the Admissions Office a day prior to the admission. This will help us in reserving a bed for you beforehand to avoid inconvenience. Please make sure to update your current contact number at the Surgery Clinic counter.

- **Note: If you are an ERAS (Enhanced recovery after surgery) patient, you will be given following instructions:**
 - If you are ERAS patient follow ERAS protocol
 - If not ERAS then do not eat anything eight hours before the surgery.
 - Ensure all kinds of jewellery, dentures and other removable items not bring to hospital on the day of admission.
 - Remove nail polish, if applied.
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- No solid food for 6 hours before the procedure
 - No clear liquid before the procedure.
 - Celecoxib 200mg / as prescribed 1 hour prior to surgery.

Other suggestions which may help you prepare for your surgery are:

- Eat a healthy, low-fat diet.
- Exercise daily to improve your strength before the surgery.
- Quit smoking at least 3 weeks before the surgery to reduce post-operative risk of lung problems.

Medication

- Please bring your current medication list with you to help your healthcare staff review your medications. They will guide you on which medication to stop and which you may need to take on the day of the surgery.
- If you are taking any blood thinning medication, such as aspirin, please inform your healthcare team and inquire when to stop these medications prior to the surgery.
- If you are a diabetic and are taking any medication for to manage your condition, please notify your healthcare team and ask them how far in advance of the surgery stop taking these medications.

Admission day

Before you arrive at the hospital:

- Make sure to remove all your jewellery, if any.
- Remove any nail polish you may have applied.
- Remove any dentures before going to the operation room (OR).

- If you are an ERAS (Enhanced Recovery After Surgery) patient, please note the below:
 - Do not have any solid food from 6 hours before the procedure
 - Do not have clear liquids from 6 hours before the procedure
 - You will be given an 800 ml carbohydrate drink to be had 8 hours prior to the procedure and a 400 ml carbohydrate drink to be had 2 hours before the procedure.
 - You will be given medication an hour before the procedure.
- If you are not an ERAS patient, do not eat anything eight hours before the procedure.

At the hospital:

- Reach the Admissions Office for your bed allocation on the given time.
- After you have been assigned a bed by the Admissions Office, please reach your assigned bed for further processes.
- You will be asked to change into a hospital gown.
- Your assigned healthcare provider will assess you.
- Your nurse may insert an intravenous (IV) cannula or catheter before the surgery. This process may also be performed by the anaesthesiologist at the OR.
- You will be taken to the OR accompanied by a nurse and an attendant on a bed or stretcher.
- While you are in the OR, your attendant can wait in the OR waiting area if they wish.
- After the surgery, you will be shifted to the recovery room for observation.
- In the recovery room, your family member will be allowed to visit you when you gain consciousness.
- Once you recover from anaesthesia and under consultation you will be transferred back to your hospital bed for further management.

After the surgery

After your surgery, you will be encouraged to move about to enable a speedy recovery. Lying down on the bed may cause some complications, like pneumonia, muscle weakness and DVT (blood clots formation).

After your surgery, your nurse will also help you in the following activities. Later when you feel stronger, you may do these by your own.

- Deep breathing and coughing exercises every 2 hours.
- Turn every 2 hours from your back to your side to change positions.
- The nurse will help you to get out of the bed within 6-8 hours of the surgery, and encourage you to sit on a chair.

- The nurse will help and encourage you to go for short walks, at least the times a day, with assistance. Please ask questions from your nurse about the best ways to move and get out of bed.

Post-operative pain management

After the surgery, it is very important to control your pain intensity for a faster, more comfortable recovery.

There are different ways to manage pain after abdominal surgeries. Below are some of the most common ways to manage post-surgical pain.

- Intravenous (IV) pain medicines
- Oral pain medicines

Your healthcare team, will work with you to decide the best ways to manage your pain.

Diet after the surgery

- You will be given sips of water as soon as you wake up.
- You may be given only clear liquids for a while to avoid chances of vomiting or nausea and recommended a soft diet initially and then slowly will be allowed regular diet.

Contact your doctor if any of the below symptoms occur after discharge:

- Persistent nausea or vomiting
- Inability to tolerate foods or fluids
- Swelling or pain in either leg or calf
- Increased redness, increased drainage, swelling at the surgical site
- Worsening pain
- Fever of 101 degree Fahrenheit or more.

Discharge instructions

Activity

- You may feel some discomfort for at least one week after your surgery which may restrict your activity.
- Take your pain relieving medications as recommended.
- Make sure someone is around you for the first 24 hours after the surgery.
- Take short walks at least two to three times a day, and more if you are comfortable.
- You may climb stairs as needed, as long as you do not get dizzy or weak.

- Do not drive a car or any other vehicle for a week after your surgery. After that, follow your doctor's instructions.

Deep breathing and coughing

- Practice deep breathing and coughing 10-15 times every hour for the first 24 to 48 hours after surgery.
- Please note that when coughing, be sure to place a pillow over the incision and gently press inward to reduce the pressure on your incision.

Lifting

- You are not allowed to bend or lift more than 10 lbs. / 5 kg weight for the first 2 weeks after your surgery.
- Light work at home or at the office is encouraged. Your abdominal wall muscles may feel a little sore for a week after surgery.

Medications

- Take all your medications as prescribed. Discuss with your nurse or doctor if you have any questions

Incisions

- It is recommended that you bathe or shower 24 hours after surgery and then daily in order to maintain good care of your incisions.
- Clean your sutures with soap and water by firmly massaging the area using your fingertips.
- Wound dressings or ointments or creams over the incisions are not recommended, unless prescribed.

Follow Up

- Follow up with your doctor at the AKUH consulting clinics one week after your surgery.
- Your doctor will assess the condition of your wound and may remove the stitches on this visit.

In case of emergency, please call:

GI and General Surgery Hotline Number: 0304-22737333 (from Monday to Friday, 8:00 am – 5:00 pm, except on public holidays).

GI and General Surgery Ward: 021-34862190 and 021-34862191.

Emergency Room: 021-34861090 and 021-34861091.