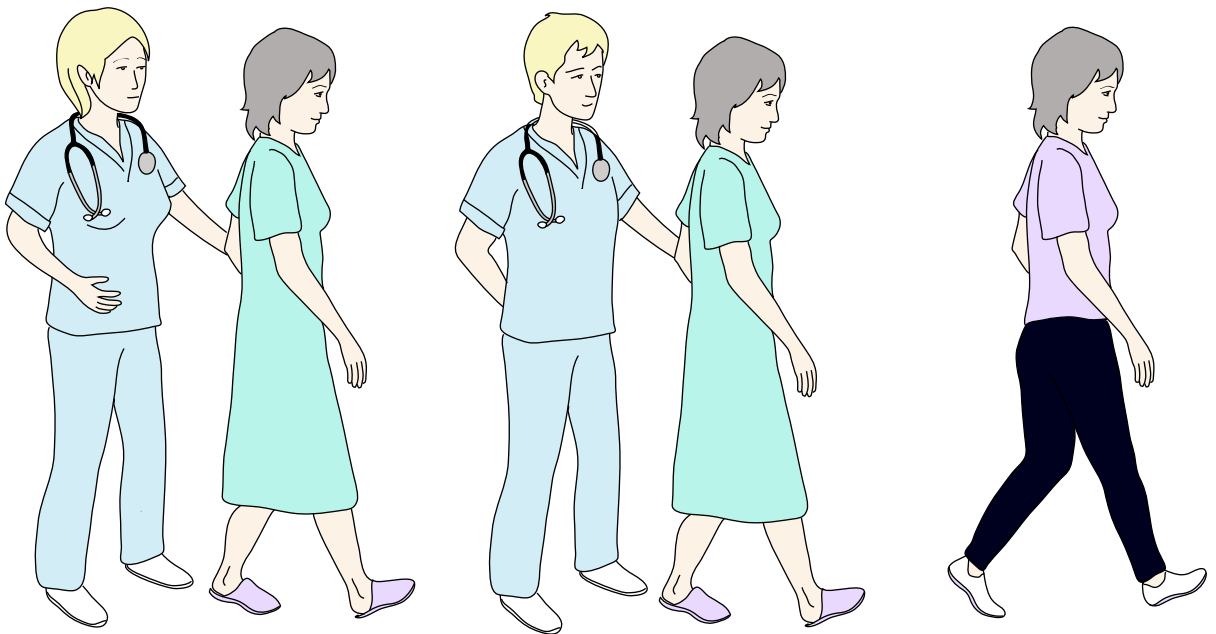


# A Guide to Bowel Surgery

A patient-friendly booklet for: \_\_\_\_\_



This booklet is to help you understand  
and prepare for your surgery.

Please review it with the nurse and your family. Please bring  
it with you on the day of your surgery.

Centre universitaire  
de santé McGill



McGill University  
Health Centre



Centre hospitalier de St. Mary  
St. Mary's Hospital Center

*Excellence au cœur de nos soins  
Caring through excellence*

This booklet was developed by The Montreal General Hospital (MGH) Clinical Care Pathway Patient Education Working Group, the 18th floor surgical nurses, the nutritionist and physiotherapist and reviewed by the colorectal surgeons.

We would like to recognize the MUHC Patient Education Office and the McGill Molson Medical Informatics for their support throughout the development of this booklet, the design and layout, as well as for the creation of all the images.

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## IMPORTANT: PLEASE READ

**Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.**

Centre universitaire  
de santé McGill



McGill University  
Health Centre



Office d'éducation des patients du CUSM  
MUHC Patient Education Office



Projet d'informatique médicale Molson de McGill  
McGill Molson Medical Informatics



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St. Mary's Hospital Center  
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*Caring through excellence*



PRET SURE  
Parcours de rétablissement chirurgical du CUSM  
MUHC Surgery Recovery Program

This booklet is also available at:  
MUHC Health Education Collection (<http://infotheque.muhc.ca/>)  
MUHC Patient Education Office ([www.muhcpatienteducation.ca](http://www.muhcpatienteducation.ca))

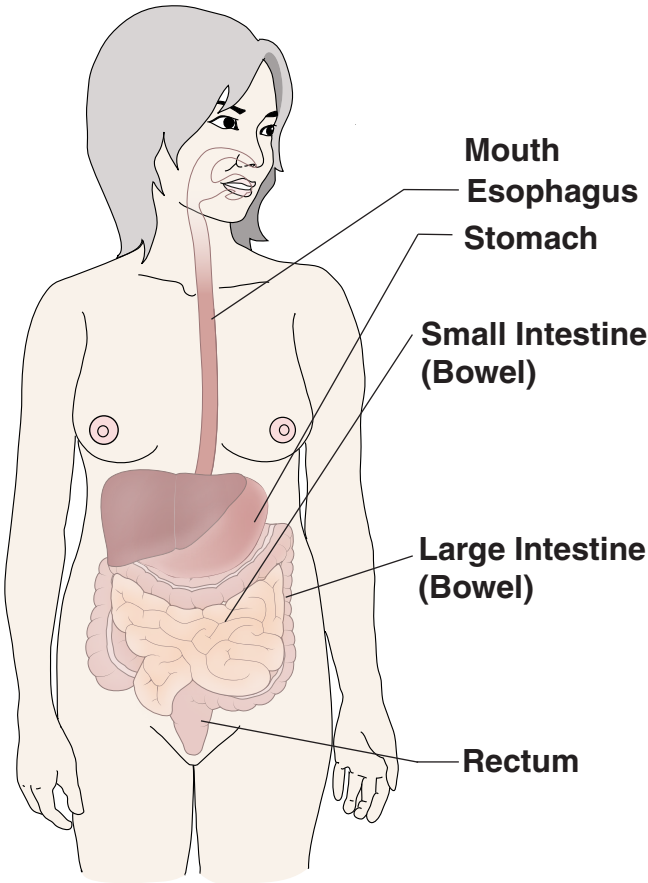


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# Introduction

When you are admitted to hospital for your bowel surgery you will be taking part in a **Clinical Care Pathway** (fast recovery program). The aim of this program is to help you recover quickly and safely.



## What is the bowel?

**Mouth**  
**Esophagus**  
**Stomach**

When eating, food passes from the mouth, through the esophagus into the stomach.

**Small Intestine (Bowel)**

From there it passes into the **small bowel** (intestine). This is where the food and nutrients are absorbed.

**Large Intestine (Bowel)**

What is left of the food then goes to the **large bowel**, which is about 6 feet long. This is where the fluid is absorbed from the food.

**Rectum**

The stool is then stored in the rectum, until it is passed out of the body through the anus.



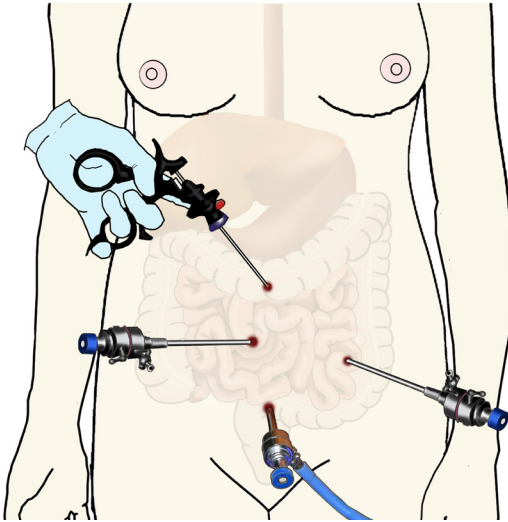
**This booklet is to help you understand and prepare for your surgery, how you can play an active part in your recovery and give you daily goals to achieve. Please review it with the nurse and your family. Please bring it with you on the day of your surgery.**

## What is bowel surgery?

Bowel surgery (colorectal) is the removal of the diseased section of the bowel between your stomach and the anus.

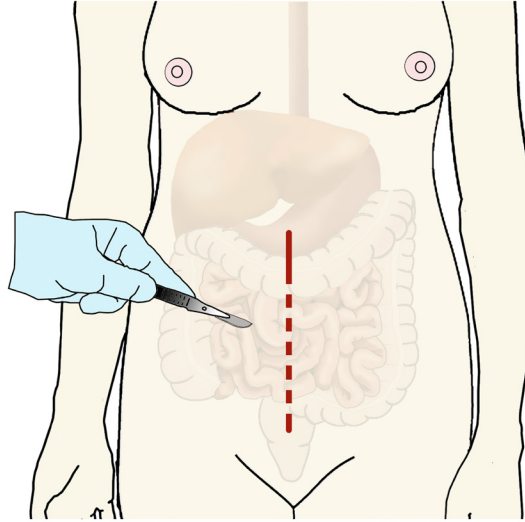
The surgery can be done 2 ways:

### 1. Laparoscopic



The surgeon will make 4 to 6 small cuts (incisions) in your belly. The surgeon uses a camera and instruments through which the diseased bowel is removed. The surgeon then sews the healthy ends of the bowel together.

### 2. Open



The surgeon makes one 10-20 cm incision in your belly to perform the surgery.

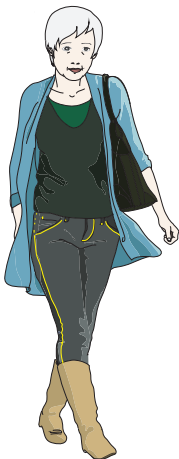
Some patients may need an ostomy and ostomy bag after surgery. An ostomy is an opening in your belly that is made by your surgeon during surgery. Stool and fecal waste pass through this opening, out of your body and into an attached plastic bag. Your ostomy may be permanent or temporary.

If you will need an ostomy, your surgeon will discuss this with you. Before your surgery, you will also meet with the Enterostomal Therapy (ET) Nurse who specializes in ostomy care. **During this meeting we will begin to briefly discuss how to take care of the ostomy after your surgery.**

**Enterostomal Therapy (ET) Nurse: (514) 345-3511 extension 3880**

# Before your surgery

## Preparing for your surgery



**Plan ahead**; make sure everything is ready for you when you go home after your operation. You may need more help at first from friends or family, with meals, laundry, bathing, cleaning, etc.

**Exercise** will help make sure your body is as fit as possible before your surgery. If you are already exercising, keep up the good work. If you are not, start slowly adding exercise into your day.

- Exercise does not need to be strenuous to be helpful; in fact, a 15 minute walk is far better than not exercising at all.
- Refer to the Exercise section (pages 21 to 22) of this booklet to learn what you will need to do after surgery. You can begin practicing these at home.

Stock your refrigerator and freezer. Think about preparing or buying frozen food in small portions that can easily be reheated until you are well enough to cook.

We **strongly suggest** you **stop smoking** completely before your surgery, as this will reduce the risk of lung problems afterwards. Doctors can help you stop smoking by prescribing certain medications.

**Do not drink alcohol** 24 hours before surgery. Alcohol can interact with some medications. Please let us know if you need help decreasing your alcohol use before surgery.



Discharge from the hospital is on the 3rd day. Tell the nurse as soon as possible if you have any worries about going home. Please remember to **organize transportation home for 10 in the morning.**

## Pre-operative visit

### During your pre-operative visit, you will:

- Have blood tests
- Have an ECG (electrocardiogram) if you are over the age of 50 (female) or over the age of 40 (male).
- Meet with a nurse who will tell you how to get ready for your surgery and what to expect while you are in the hospital.

**You will** also meet with a doctor who will ask you questions about your health and health problems:

- If you have other medical problems, you may be referred to another doctor (specialist) before surgery



**Some medication or herbal products need to be stopped a week or two before surgery. Have your list of medicines with you and the doctor will decide which ones to stop or to continue. Your pharmacist can give you a list of your medications. You may also ask your pharmacist to fax us your list of medication. Our preoperative clinic fax number is 514-734-2682.**

**If you have any further questions, you can contact the nurses of the Patient Assessment Centre at (514) 345-3511, extension 3524, from Monday to Friday, 7:30 a.m. - 2:30 p.m.**

## Before Your Surgery

### Two days before surgery

The Admitting Department will phone you to let you know what time to come to the hospital.

You are usually expected to arrive 3 hours before your surgery is planned to start.

The time of surgery is not exact. It may be earlier or later than planned.



**If you do not receive a call before 2:00pm, you can contact the Admitting Department at (514) 345-3511 ext 5054**

Date of surgery: .....



Time of arrival at the hospital: .....

**If you have any further questions, you can contact the nurses of the Patient Assessment Centre at (514) 345-3511, extension 3524, from Monday to Friday, 7:30 a.m. - 2:30 p.m.**



# Cancelling your surgery

If you get a cold, are not feeling well or become pregnant, please call your surgeon's office as soon as possible. If it is not possible to reach your surgeon, please phone the **Admitting Department at (514) 345-3511 ext. 5054**

**Call to reschedule if:**



You are not well.



You need to cancel.

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

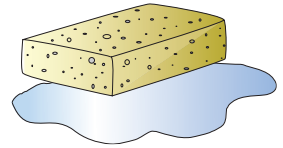


**Please keep in mind that St. Mary's Hospital may need to delay or cancel your surgery. Your surgeon will reschedule your surgery as soon as possible.**

## Before Your Surgery

### Instructions: day before surgery

- Before going to bed, take a shower or bath using one of the sponges given to you. Wash your body including your belly button and wear freshly washed clothes to bed.
- Do not put on any creams, lotions, perfumes or cologne.
- Do not shave the area to be operated.

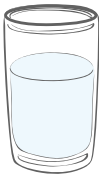


The nurse at the Patient Assessment Center will use the following pages to explain the best diet plan for you. Speak to your nurse to discuss any questions or concerns you might have.

### Can I eat or drink the day before my surgery?

You may need to follow a special diet the day before your surgery. This diet is planned for each patient to:

- prepare your bowels for the surgery
- give you the strength and nutrients you need for a smooth and quick recovery

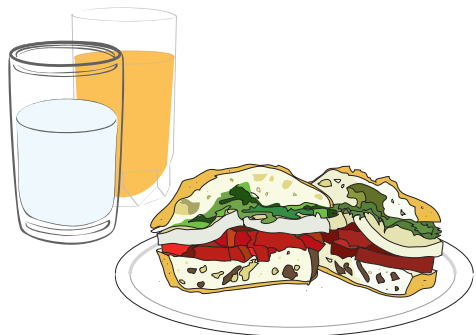


For the entire day before surgery only drink clear fluids

**Examples:** All clear juices (no pulp), Gatorade, soft drinks, jell-o, clear broth or bouillon, water, coffee or tea (no milk), Popsicle.

**NO MILK OR DAIRY PRODUCTS OR SOLID FOOD.**

OR

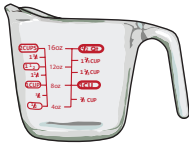


You can eat and drink anything the day before your surgery.

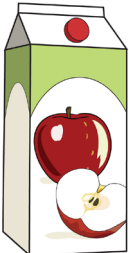
## Before surgery

If you may drink carbohydrate drinks before the surgery:

- Choose **ONLY** one of the drinks below as your clear fluid.




**Try to drink at least the amount shown**



**apple juice**

evening before:  
850ml / 3 1/2 cups

morning of:  
425ml / 1 3/4 cups




**orange juice (no pulp)**

evening before:  
1000ml / 4 cups

morning of:  
500ml / 2 cups


OR



**commercial iced tea**

evening before:  
1100ml / 4 1/2 cups


morning of:  
550ml / 2 1/4 cups



**cranberry cocktail**

evening before:  
650ml / 2 3/4 cups

morning of:  
325ml / 1 1/3 cups



**lemonade**

evening before:  
1000ml / 4 cups

morning of:  
500ml / 2 cups

OR

OR

OR


**Stop drinking any fluids starting 2 hours before your expected time of arrival at the hospital. If your expected time of arrival at the hospital is 11AM, stop drinking at 9AM.**



***Exception: if your expected time of arrival is between 6:00 and 6:30 in the morning you should stop drinking at 5:30 in the morning.***

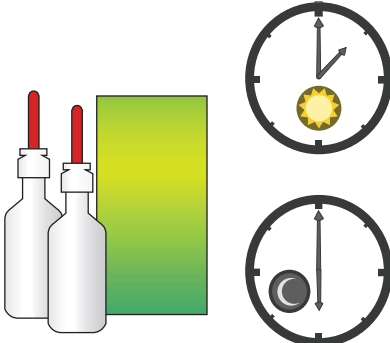
**There are benefits to drinking before surgery. If your nurse has told you that you should drink we would like you to make an effort to choose one of the drinks and drink the amount shown in the evening and in the morning of your surgery.**

# Do I need to take a laxative?

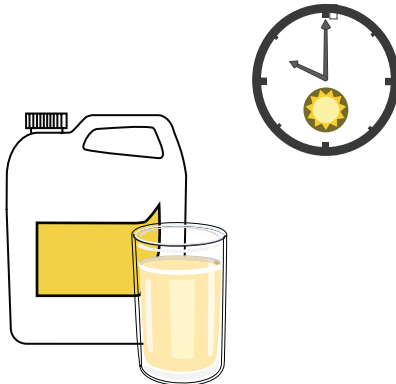
No laxative needed

OR

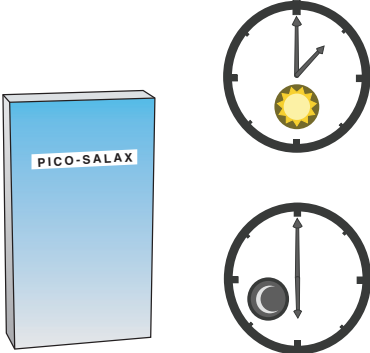
Sodium phosphate fleet enemas the day before surgery at 2pm and 6pm

OR

At 10 AM start drinking the **Golytely®**

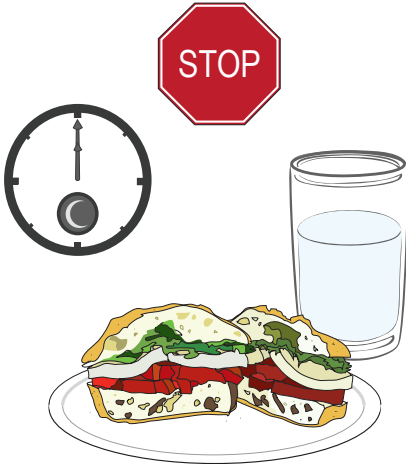
OR

**Picosalax®** 2 sachets the day before surgery at 2pm and 6pm

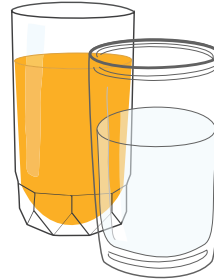
## Morning of Surgery

Can I eat or drink the day of my surgery?



Stop eating and drinking at  
**midnight**

**OR**



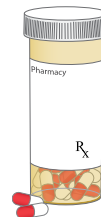
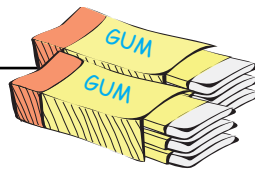
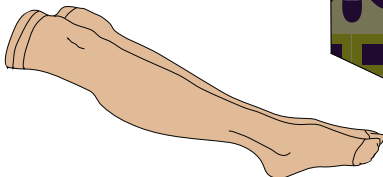
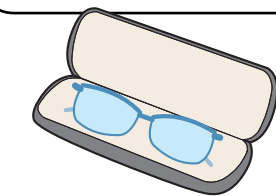
You should stop eating at  
midnight. You are allowed  
to have carbohydrate drinks  
until your expected time of  
arrival at the hospital.

**No diet drinks please.**

## Instructions: day before surgery

### Things to bring to the hospital

- This booklet.
- Any private insurance information you might have.
- Put on your tight elastic (compression) stockings as prescribed.
- Bathrobe, slippers, pajamas, loose comfortable clothing.
- Toothbrush, toothpaste, comb, deodorant, mouthwash, soap, Kleenex, shaving equipment, and perhaps earplugs.
- If you wear glasses, contact lenses, a hearing aid or dentures, please bring the appropriate containers with your name on them.
- 2 packs of your favorite gum
- If you use a cane, crutches or walker at home, please bring them to the hospital with your name on them.
- Your medication in their original containers.
- Your valid Medicare card.
- Please bring a \$4.00 deposit for the telephone.
- If you do not speak French or English, please bring someone to translate for you.
- Please leave all jewelry, credit cards and objects of value at home. The hospital is not responsible for any lost or stolen articles.



# Day of your surgery

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## At home:

- Take a shower or bath with the second sponge given and put on freshly washed clothes.
- Return to your bed and lie down for 15 minutes with your feet elevated. Put on your special tight elastic stockings your doctor asked you to purchase. It is important to have them on before you stand up. These help your blood to circulate better. They prevent blood clots from forming in your legs. You should wear them until the nurse says you can take them off.
- Do not put on any creams, lotions or perfume.
- Do not wear make-up or nail polish.
- Do not shave the area to be operated.
- Remove all jewelry and leave it at home.



Take the following medication  
(with a sip of water)

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**Do not** take the  
following medication

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## At the hospital

Report directly to the **Admitting Department (G-310)** at the time given.

You will have another blood test.

The admitting clerk will ask you about the kind of room you would prefer, and have you sign a general consent and admission forms.

**Please keep in mind that it is not always possible to have a private or semi-private room.**

**The nurse will help you to get ready for the surgery.**

**He/She will:**

- Go through a checklist with you.
- Have you change into a hospital gown.
- Make sure your personal belongings are in a safe place.



When the operating room is ready, an orderly will bring you there.

At the operating room area, you will meet your anesthesiologist and the other members of the surgical team. We will start the epidural in your back and then your anesthesiologist will give you a general anesthetic. You will be asleep and pain-free during your surgery.

## Waiting room

Family and friends can wait for you in the **waiting room** located on the **6th floor**.

Our space is small so we ask that you limit the number of people coming with you.



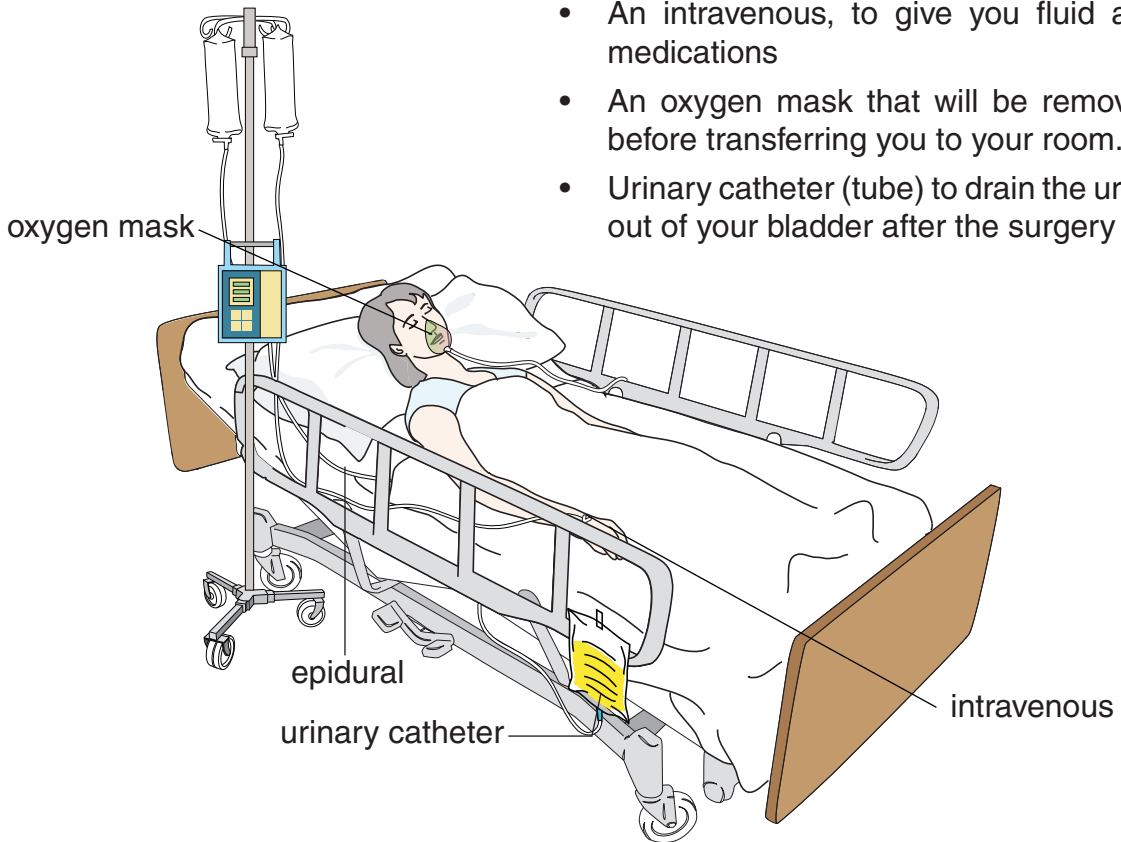
# After your surgery

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You will wake up in the Post Anesthesia Care Unit (PACU) before being transferred to your room. **No visitors are allowed there.**

## You will have:

- An epidural (a small tube in your back) that provides continuous pain medication (*see next page*)
- An intravenous, to give you fluid and medications
- An oxygen mask that will be removed before transferring you to your room.
- Urinary catheter (tube) to drain the urine out of your bladder after the surgery



Your vital signs (pulse, blood pressure) will be checked often. Your nurse will verify the bandages (dressing) and ask you about your pain.

Your family and friends will only be able to see you once you are in your room.

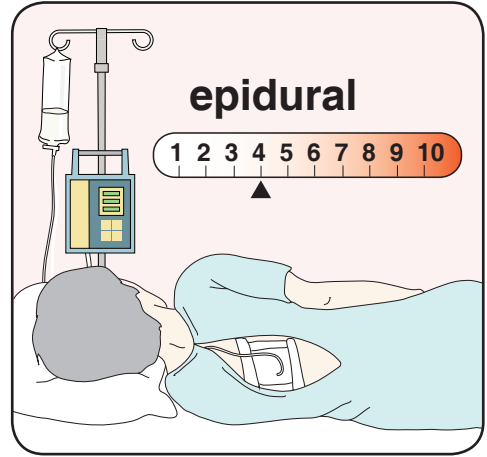
## After the Surgery

### Pain Control

A catheter is placed in your back and will give you continuous pain medication. You will be asked to rate your pain on a scale from 0-10. The nurse will adjust the epidural as needed.

#### Pain relief is important because it helps you:

- Breathe more easily
- Move more easily
- Sleep better
- Recover faster
- Eat better
- Do things that are important to you



No pain

### Pain Intensity Scale

Pain as bad as  
you can imagine

0 1 2 3 4 5 6 7 8 9 10

You will be asked to rate your pain on a scale from 0-10. Our goal is to keep your pain score below 4/10.

Some patients will be given a pump connected to the intravenous to control the pain instead of an epidural. This pump is called a PCA (Patient-Controlled Analgesia) pump. The PCA pump will give you pain medicine *only if you* push on the button. Every time you push the button and get pain medication you will hear a beep from the PCA pump.

**Do not wait until the pain gets too bad before telling us.**

You will not become addicted to pain medication given to you for surgical pain.



**Always tell the nurse if your pain is more than 4 on the pain scale. This will help the nurse decide how the best manage your pain.**

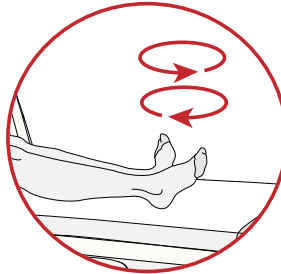
## Exercises

### Get up and move

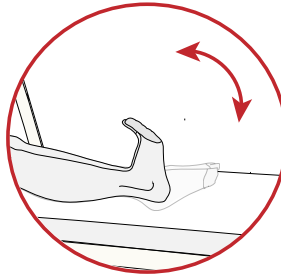
Lying in bed without moving may cause many problems like pneumonia, blood clots and muscle weakness. You can start the following exercises as soon as you wake up, and continue them during your stay in hospital.

#### 1. Leg exercises

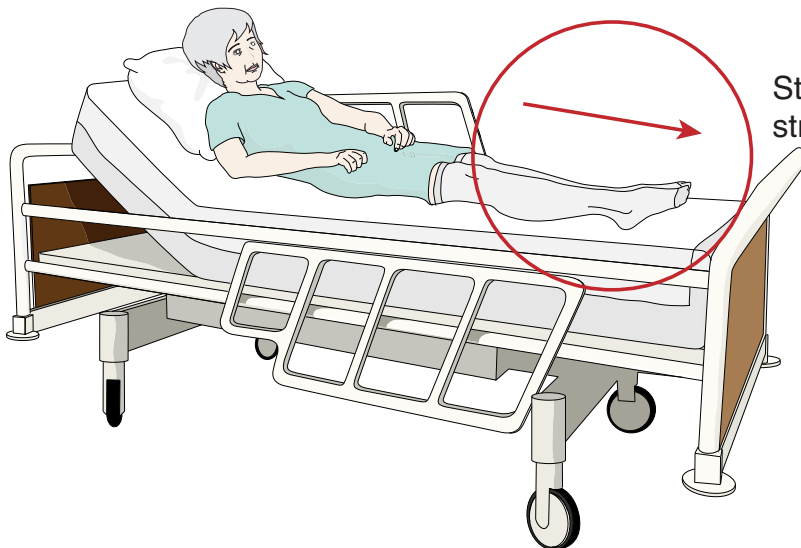
These will help blood circulation in your legs. Repeat these 4 to 5 times every 30 minutes while you are awake.



Rotate your feet to the right and left.



Wiggle your toes and bend your feet up and down.



Stretch your legs out straight.

## After the Surgery

### Exercises

#### 2. Deep breathing and coughing exercises

The spirometer is a simple device that makes you breathe deeply, to prevent pneumonia.



- Put your lips tightly around the mouthpiece, breathe in deeply and try to hold the red ball up as long as you can.
- Remove the mouthpiece, breathe out and rest for a few seconds.
- Repeat this exercise at least 10 times every hour or more often if you can, while you are awake.
- Then take a deep breath and cough using a small blanket or pillow to support your incision.



**Deep breathing and coughing exercises will help prevent pneumonia.**

Morning: \_\_\_\_ /10

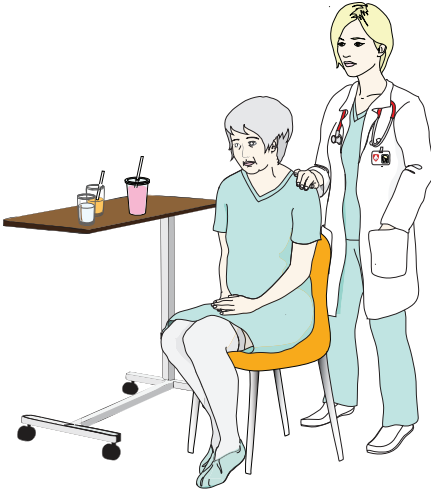
Midday: \_\_\_\_ /10

Evening: \_\_\_\_ /10

Night: \_\_\_\_ /10

# In your room

With the nurses help, you will get up and sit in a chair.



Start drinking liquids and the protein drink.

Start chewing gum for 30 minutes to stimulate your bowel.

Do your leg exercises as described on page 21



Start your breathing exercises to help prevent pneumonia and other infections of your lungs.



## MY PAIN TODAY

Morning: \_\_\_\_ /10

Midday: \_\_\_\_ /10

Evening: \_\_\_\_ /10

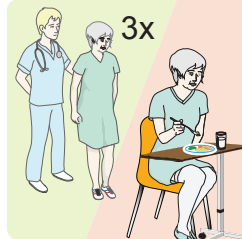
Night: \_\_\_\_ /10

# One day after surgery

## Pain

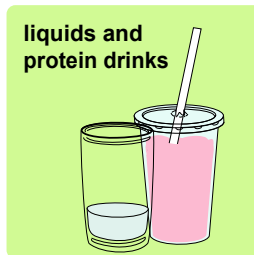
Tell your nurse if you are having pain greater than 4/10 on the pain scale.

## Activities:



- Your urine tube will be removed in the morning.
- Once the urine tube is removed, get up and walk to the bathroom to urinate.
- If you are drinking we will disconnect and remove the intravenous fluid.
- With assistance, you will get up and walk the length of the hallway at least 3 times today.
- Be out of bed, on and off for at least 8 hours of the day.
- Sit in the chair for all meal times.
- Do your breathing exercises at least 10 times every hour while awake.

## Meals:



- Continue to drink liquids and your protein drinks.
- Chew gum for 30 minutes 3 times a day, to stimulate your bowel.

**\*Plan to go home in 2 days.**



## MY PAIN TODAY

Morning: \_\_\_\_/10

Midday: \_\_\_\_/10

Evening: \_\_\_\_/10

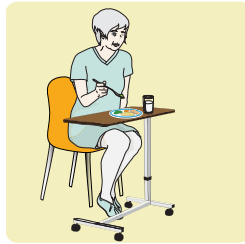
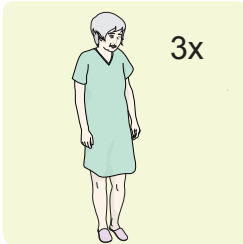
Night: \_\_\_\_/10

# Two days after surgery

## Pain

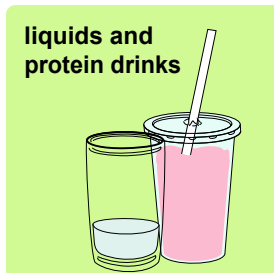
- Tell your nurse if you are having pain greater than 4 on the pain scale
- If you have a PCA pump for pain control it will be removed and you will take pills to control your pain.
- If you have an epidural it will be removed today.

## Activities:



- Walk the length of the hallway at least 3 times today. You will be encouraged to walk more each day.
- Be out of bed on and off for at least 8 hours of the day
- Sit in the chair for meals
- Walk to the bathroom to urinate
- Continue to do your breathing exercises every hour while awake.

## Meals:



- Eat solid foods (you might have some **temporary** food restrictions).
- Continue to drink liquids and protein drinks.
- Continue to chew gum for 30 minutes, 3 times a day.

**\*Arrange for someone to pick you up at 10:00 am tomorrow.**

## MY PAIN TODAY

Morning: \_\_\_\_ /10

Midday: \_\_\_\_ /10

Evening: \_\_\_\_ /10

Night: \_\_\_\_ /10

# Three days after surgery: Going home

## Pain

- Tell your nurse if you are having pain greater than 4/10 on the pain scale.

## Activities

On the 3rd day you should continue the same activities as yesterday and again increase the level of activity if possible.

## Follow-up appointment after surgery

Surgeon's name: \_\_\_\_\_ 

Appointment Date and Time: \_\_\_\_\_



## Plan to go home today before 10:00 am

If you are unable to leave the hospital at this time, you can wait in the patient's sitting room located on each unit. We need to prepare your room for the next patient.

You will be given an appointment with your surgeon for a follow-up before leaving the hospital.

## Summary

By doing your deep breathing exercises, chewing gum, eating well, being out of bed and walking regularly, research has shown that you will recover quicker. You are less likely to develop any lung infections or circulation problems and your bowel function will return to normal faster. By avoiding all these problems, you are more likely to go home sooner and feel better faster.

# At Home



**Complications do not happen very often but it is important that you know what is normal and what to look out for.**

## Abdominal pain

It is not unusual to have some pain during the first few weeks following surgery.

The acetaminophen (Tylenol®) and the anti-inflammatory should be taken first to relieve the pain. **Only add the narcotic if the pain is not relieved by the acetaminophen (Tylenol®) and the anti-inflammatory.**

If you feel that the anti-inflammatory and pain medicine is causing burning or pain in your stomach, stop taking them right away and call your surgeon.

If you have severe pain that is not relieved with the pain medicine or have a fever and feel generally unwell, you should contact your surgeon or go to the emergency room. **Please track your pain levels at home using the Pain Diary found on page 33.**

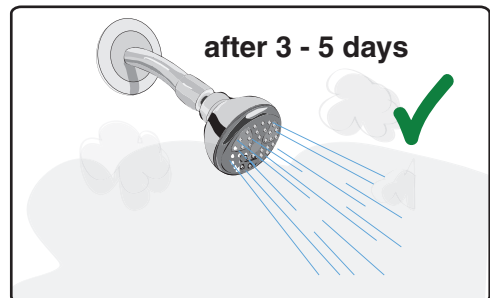
## Your incision

It is not unusual for your wounds to be slightly red and uncomfortable during the first 1-2 weeks after surgery.

### You can have a shower:

- 3 days after laparoscopic surgery
- 5 days after open surgery
- Gently wash the area and let water run over the incision. (Don't scrub the area)

### No soaking in the bath for 2 weeks



## At Home

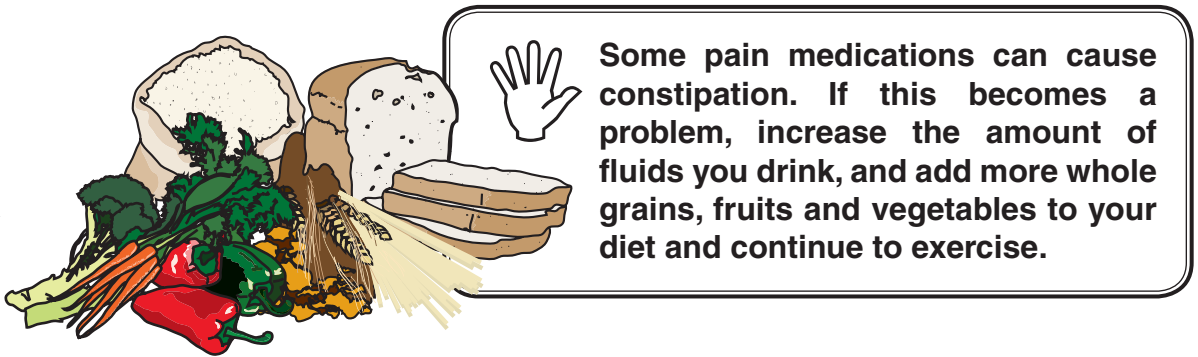
Your nurse from the hospital will arrange to have the CLSC remove your clips or stitches 7-10 days after your surgery. The CLSC will contact you at home.

Tell your surgeon if your incision becomes warm, red, and hard or if you see pus or any drainage coming from it.

## Your Bowels

Your bowel habits may change after part of your bowel has been removed. You may have loose stools or be constipated.

This should settle into a more normal pattern over a period of time.



## Diet

You can eat anything you want to unless told otherwise by your dietician or surgeon.

You may find that some foods upset you or cause loose bowel movements. Avoid them for the first few weeks after surgery and then you may re-introduce them one at a time.

It is important that you get enough protein and calories to help your body heal. Include good sources of protein like dairy products, meat, fish and poultry.

If you are finding it difficult to eat enough, try taking liquid nutritional supplements. (Examples: Ensure, Boost or homemade high protein high calorie beverages.)

**If you cannot drink fluids or keep them down, call your surgeon.**

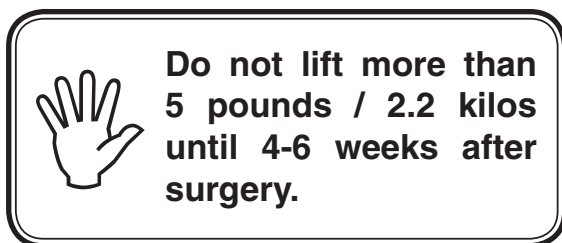
## Exercise and activities

You should continue to walk several times a day once you are home, gradually increase the distance and the intensity until you are back to your normal level of activity.

Most patients can return home with little difficulty.

Family and friends can usually give help with:

- Taking you home
- Meal preparation
- Grocery shopping
- House cleaning
- Laundry



As a general rule, once you are pain free you can go back to most activities, including sexual intercourse

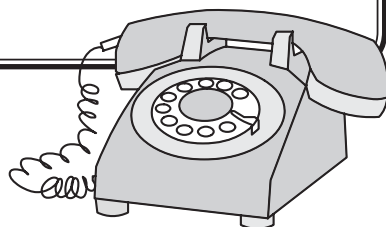
You may start to drive when you are no longer taking narcotic pain medication.

Your surgeon will decide when you are able to return to your job, depending on your recovery and your type of work.



**Call your surgeon if you have any of the following symptoms:**

- **Your incision(s) become warm, red or you see any drainage coming from the incision.**
- **You have a fever (greater then 38°C/100.4°F).**
- **You cannot drink fluids or keep them down.**
- **You are having more pain that is not relieved by the medications.**



## Important Resources

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**If you have any questions, please contact us.**

Dr. D. Anderson	(514) 933-2778
Dr. G. Arena	(514) 570-8210
Dr. G. Brabant	(514) 933-2778
Dr. S. Demyttenaere	(514) 345-3511 ext 2797
Dr. C. Emond	(514) 735-6337
Dr. D. Tataryn	(514) 488-4582

**If you would like to know more about bowel surgery, the following links might be useful:**

**<http://www.colorectal-cancer.ca>**

**<http://www.ccfc.ca>**

# Suggestions to help you stop smoking

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## There are four phases of quitting

1. Preparing to quit
2. Choosing a quit date
3. Coping with withdrawal
4. Fighting relapses

Stop smoking now and you will already be on your way to quitting.

Take it one day at a time. Think of yourself as a non-smoker. Be proud of what you have already done.

Ask your family and friends not to smoke around you.

Get a family member or a friend to stop smoking at the same time.

Join a stop-smoking group and kick the habit with other people.

Speak with your doctor about aids to help you quit such as the nicotine patch.

## Get more information from:

Montreal Chest Hospital  
**(514) 934-1934 extension 32503**  
[www.muhc.ca](http://www.muhc.ca)





Quebec Lung Association  
**(514) 287-7400 or 1-800-295-8111**  
[www.pq.lung.ca](http://www.pq.lung.ca)



# Pain Diary

Using the Pain Intensity Scale and table below, enter the level of pain you feel during the day.





**For example:**

Days After Surgery	 Morning	 Noon	 Evening	 Night
1	<u>4</u> / 10	<u>4</u> /10	<u>3</u> /10	<u>3</u> /10

No pain
**Pain Intensity Scale**
Pain as bad as you can imagine

012345678910

Days After Surgery	 Morning	 Noon	 Evening	 Night
1	__ / 10	__ / 10	__ / 10	__ / 10
2				
3				
4				
5				



# Patient Log

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## Operation Day

Date \_\_\_\_\_

### I have been drinking:

- very well
- well
- poorly
- not at all

### GOAL: Drink 1 Nutrition drink

I drank 1 nutrition drink:

I have vomited:  no  yes, \_\_\_\_\_ times

I have passed gas:  no  yes, time: \_\_\_\_\_

I have had a bowel movement:  no  yes

### GOAL: Be out of bed for 2 hours

I have been up or sat up:

- any amount of time at all
- two hours

# Day 1

Date \_\_\_\_\_

## I have been drinking:

- very well
- well
- poorly
- not at all

### GOAL: Drink 2 Nutrition drinks

Number of Nutrition drinks I have had:

I have vomited:  no  yes, \_\_\_\_\_ times

I have passed gas:  no  yes

I have had a bowel movement:  no  yes

### GOAL: Total of at least 8 hours out of bed, sit up for meals and walk two laps in the corridor.

I have been up or sat up:

At Meals:  breakfast  lunch  dinner

Morning:  2 hours  2 hours

Afternoon:  2 hours  2 hours

Number of laps in the corridor:

## Day 2

Date \_\_\_\_\_

### I have been eating:

- very well
- well
- poorly
- not at all

### I have been drinking:

- very well
- well
- poorly
- not at all

### GOAL: Drink 3 Nutrition drinks

Number of Nutrition drinks I have had:

I have vomited:  no  yes, \_\_\_\_\_ times

I have passed gas:  no  yes

I have had a bowel movement:  no  yes

### GOAL: Total of at least 8 hours out of bed.

I have been up or sat up:

At Meals:  breakfast  lunch  dinner

Morning:  2 hours  2 hours

Afternoon:  2 hours  2 hours

Number of laps in the corridor:

## Day 3

Date \_\_\_\_\_

### I have been eating:

- very well
- well
- poorly
- not at all

### I have been drinking:

- very well
- well
- poorly
- not at all

### GOAL: Drink 3 Nutrition drinks

Number of Nutrition drinks I have had:

I have vomited:  no  yes, \_\_\_\_\_ times

I have passed gas:  no  yes

I have had a bowel movement:  no  yes

### GOAL: Total of at least 8 hours out of bed.

I have been up or sat up:

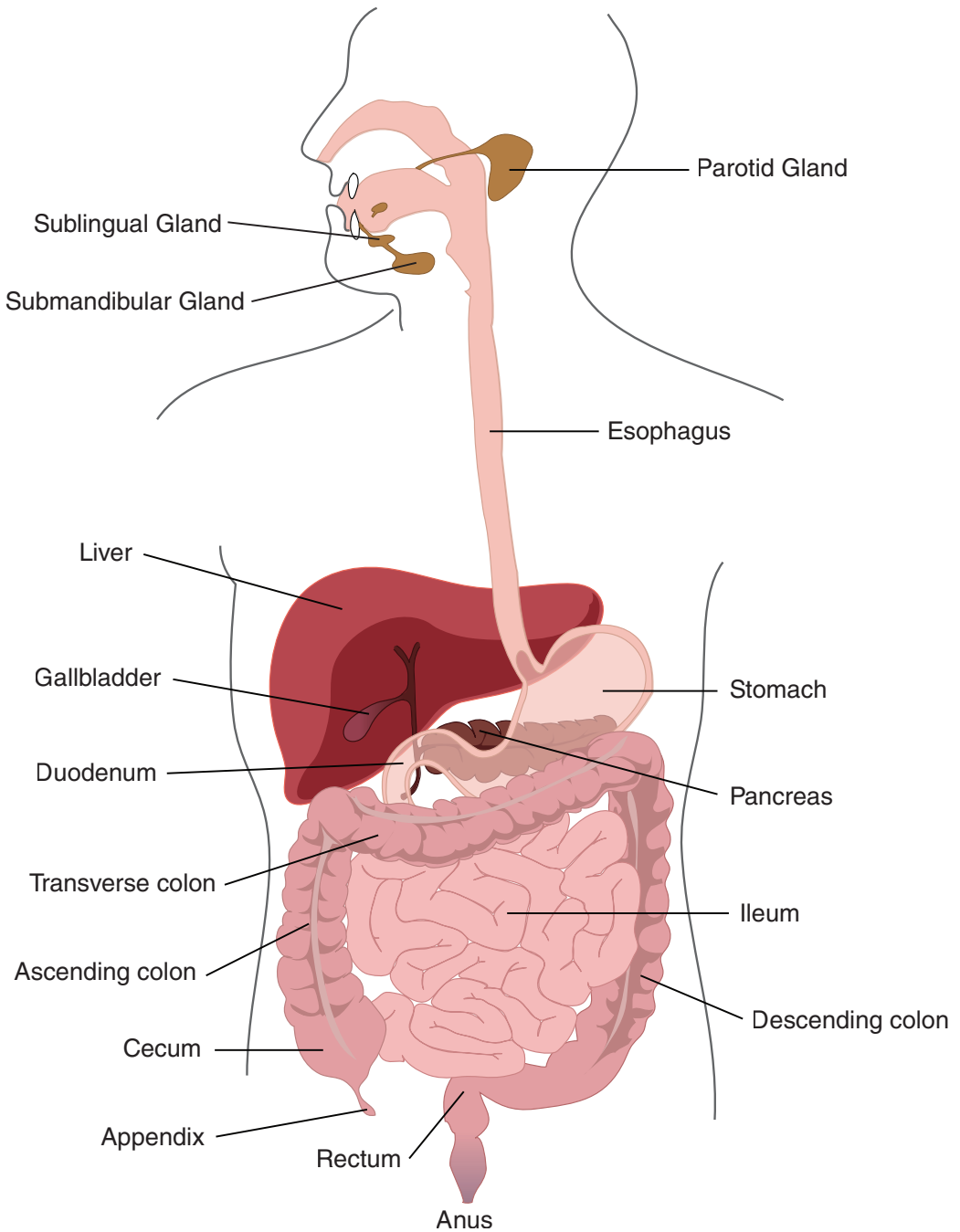
At Meals:  breakfast  lunch  dinner

Morning:  2 hours  2 hours

Afternoon:  2 hours  2 hours

Number of laps in the corridor:



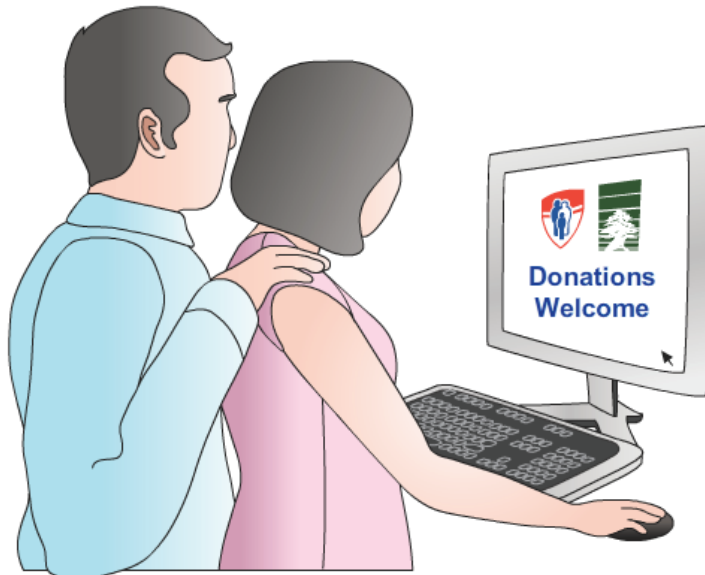


# Help Us Help Others

Help support the MUHC Patient Education Office! Donations make a huge difference. They help us create health information materials and programs to deliver better quality care for life.

All patient materials are freely available on the internet to MUHC patients, and to patients and families across the world at large.

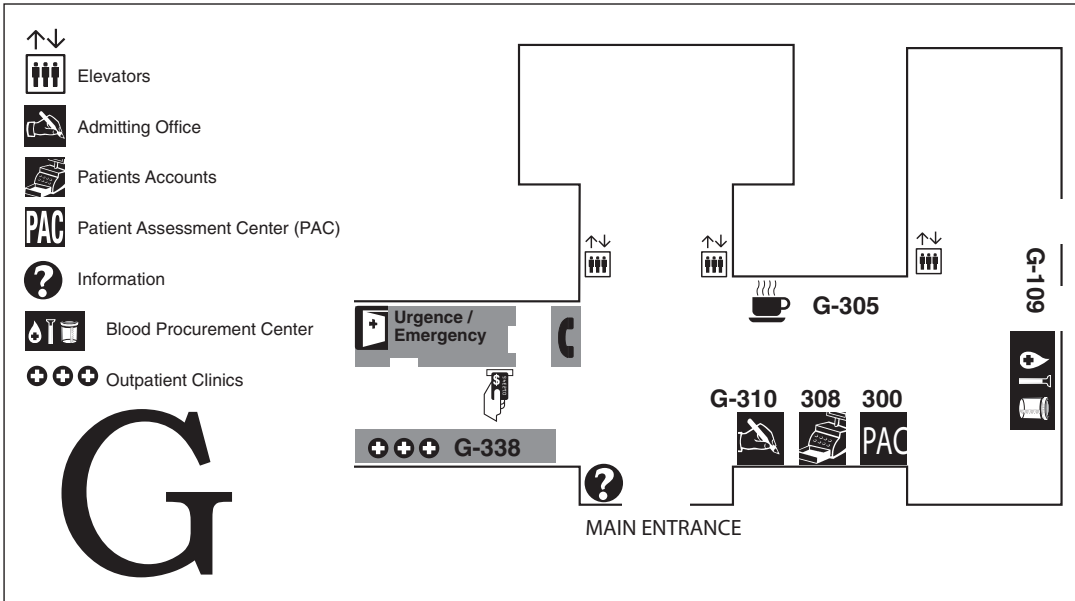
Call the Cedar's Cancer Institute to donate to  
the Patient Education Fund:  
**514-934-1934, ext. 71619.**



MUHC Health Education Collection (<http://infotheque.muhc.ca>)  
MUHC Patient Education Office ([www.muhcpatienteducation.ca](http://www.muhcpatienteducation.ca))

# Other Information

Your surgery will take place in the Operating Suite on the 2nd floor. Many services and departments you or your family may need are located on the **Ground Floor**. Please refer to the following plan to guide you.



## Café St. Mary's - Coffee Shop (Ground floor)

Monday to Friday 7h 30 - 19h 30  
 Saturday, Sunday & Stat Holidays 8h 00 - 19h 30

## Cafeteria (1st floor)

Monday to Friday 8h 00 - 14h 15  
 Saturday, Sunday & State holidays Closed

## Gift Shop

Located in the Main Lobby, offers items, personal care products, magazines/newspapers, cards and flowers. All profits are donated to the St. Mary's Hospital Foundation.

Monday to Friday 9h 00 - 19h 30  
 Saturday, Sunday 11h 30 - 17h 00

Note the latex balloons and flowers from the garden are not recommended because of the risk of allergy and the insects they may contain.

## Automated Bank Machine

Located on the Ground floor between the main entrance and the Emergency Dept.

## X-Ray/Medical Imaging (1st floor, West Wing in front of the Elevators)



## **Procurement Center, Blood Test & Laboratory (G-109) Ground floor, West Wing)**

### **Taxi**

Direct lines to taxi cab companies are located in the Main Lobby and in the Emergency Department Entrance.

### **Telephone**

Telephone rate: you will be asked to give a deposit of \$4.00 upon admission for the use of the telephone. Dial "9" before placing an external call. Should you need to make a long distance call, dial 0 and inform the Bell Canada Operator how the call will be paid. (i.e. calling card, collect call). There are designated areas to use a cellular phone, please follow the posters indications.

### **Television**

Sets can be rented. You need to fill a form located near the nursing station.

### **Internet**

There is no wireless network (Wi-Fi) available in the hospital.

## **Resource Person(s)**

### **Surgeon**

Name: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_

First follow-up appointment: \_\_\_\_\_

Questions to ask: \_\_\_\_\_

\_\_\_\_\_

### **Family Doctor**

Name: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_

Appointment: \_\_\_\_\_

Questions to ask: \_\_\_\_\_

\_\_\_\_\_

### **Hospital Nurse**

Name: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_

Questions to ask: \_\_\_\_\_

\_\_\_\_\_

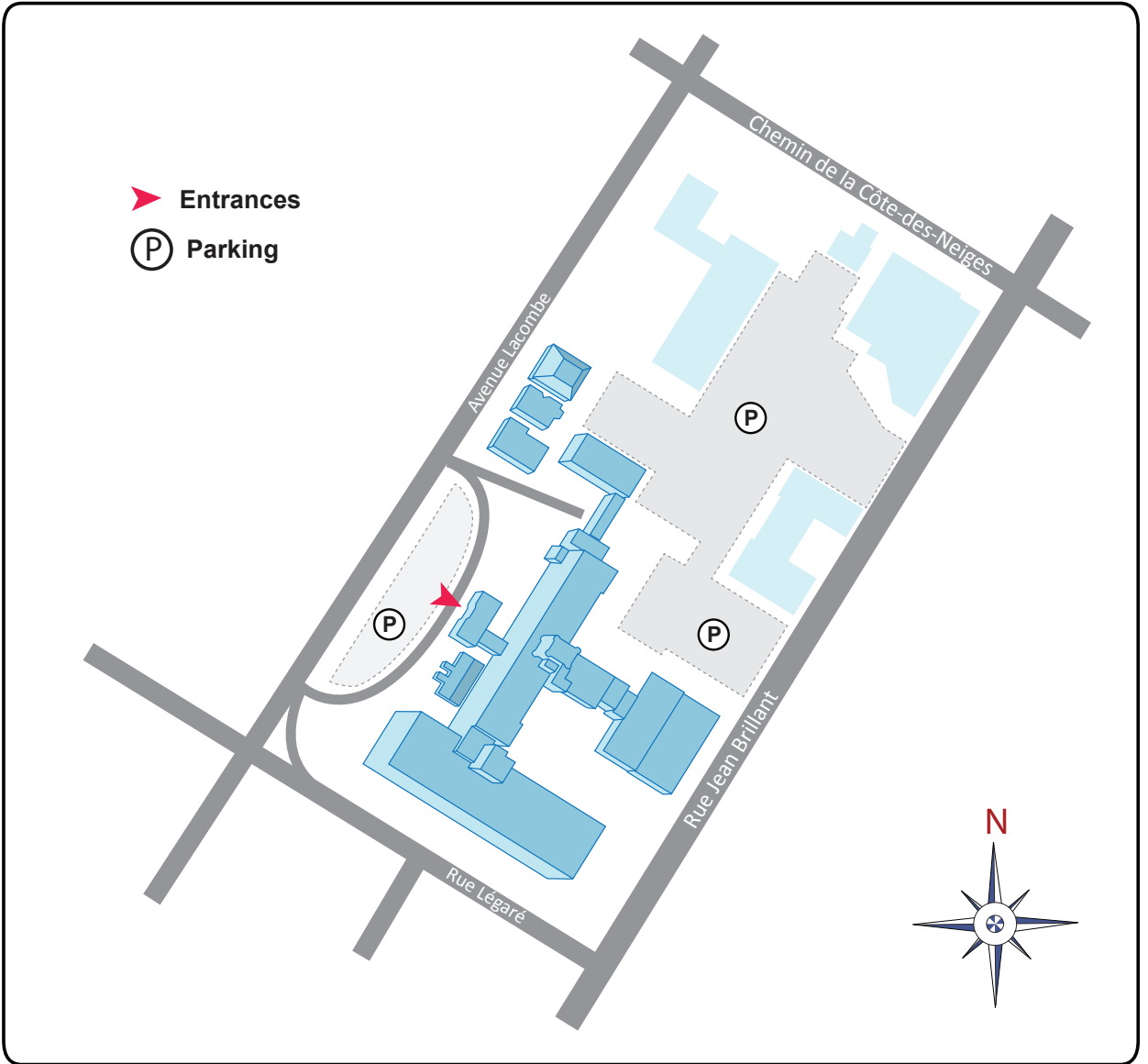
### **CLSC Physiotherapist**

Name: \_\_\_\_\_ Phone No: ( ) \_\_\_\_\_

Appointment: \_\_\_\_\_

Questions to ask: \_\_\_\_\_

\_\_\_\_\_



▶ Entrances  
 (P) Parking



Centre hospitalier de St. Mary  
 St. Mary's Hospital Center  
*L'excellence au cœur de nos soins*  
*caring through excellence*

St. Mary's Hospital Centre  
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 Montreal (Quebec) H3T 1M5  
 CANADA