

Discharge Instructions: Esophagectomy

The following instructions will provide helpful information that will assist your recovery. These are designed to be general guidelines. Remember, everyone recovers differently. If you have any questions or concerns, please contact your doctor.

Pain Medication

- You will be given a prescription for pain medicine after surgery. DO NOT drink alcohol while taking pain medication.
- Please follow the direction on the label.
- Do not drive while taking pain medication.
- Do not take pain medication on an empty stomach. This may make you nauseated.
- Use a stool softener or any laxative if needed. Constipation can result from any pain reliever including Tylenol.
- You may take over the counter anti-gas medication such as GAS-X or Mylicon if needed.
- If you no longer need your prescribed pain medication, you may take over the counter pain medication such as Tylenol (acetaminophen) Advil (ibuprofen) or Aleve (naproxen) for pain. Follow the instructions on the label.

Activity

Exercise

- Activity helps to improve muscle tone and strength.
- Walk as much as you can comfortably. Your goal is to walk at least three times per day. Walking is one of the most important activities that you can perform to recover from your surgery. Avoid strenuous activities. Stop exercising if you experience shortness of breath or chest pain.
- Going up stairs one at a time is not a problem.
- Do not lift anything heavy (over 25 pounds) or as directed by your physician.
- Do not drive a motor vehicle; operate machinery or power tools for 2 weeks.
- You may drive once you can stamp your foot on the ground without causing pain, but not while taking narcotic pain medication.
- Discuss any travel plans immediately following surgery with your physician. Do not fly for 6 weeks after surgery.

Incentive Spirometer

- Continue to use your incentive spirometer 10 times per hour while you are awake.
- It is important to cough and deep breathe.

Smoking

- Smoking can increase heart rate, blood pressure, cause heart spasms, plaque build-up in arteries, and scarring of lungs. DO NOT SMOKE.

Sexual Activity

- Sexual activity takes about the same energy as climbing two flights of stairs. So wait until you are not tired or tense. Use positions that don't put pressure or cause discomfort to the chest.

Diet

- Tube feeds as ordered.
- See diet instruction sheet. Follow diet per your surgeon's orders.
- Healthy eating will help with recovery and healing.
- Must always keep head of bed to 45 degrees to prevent aspiration.

If you have any questions or concerns please contact your doctor.

Incisional Care

- You will have a white dressing over your incisions (steri strips). These will fall off on their own or can be taken off at your first office visit.
- You will have a chest tube(s) dressing which must stay on for 48 hours after the chest tube(s) was removed. After 48 hours you can remove this dressing and shower as normal. Leave the area open to air. You may or may not have a suture under this dressing which will be removed at your first office visit.
 - ▶ It is not uncommon for some reddish fluid to accumulate under the bandages. Clear colored or blood tinged drainage may occur from wounds and is of no immediate concern.
 - ▶ If you have staples, they are generally removed during the first postoperative visit.
 - ▶ Most incisions will have buried absorbable sutures, which do not need to be removed.
- Itching, numbness, and soreness is normal.
- Do not apply any lotion, cream, or ointment to your incisions. Watch for drainage, openings, warmth, or redness at the incision.

Drains

- If you go home with a feeding tube (jejunostomy tube), follow the daily feeding schedule recommended by the hospital nutritionist.
- You will likely go home with one or two Blake drains. Record daily output and color. If the output becomes murky, call the office immediately.

Showering/Bathing/Water Exposure

- Shower daily.
- Do not scrub at your incisions. Pat dry.
- Do not soak in the bathtub, pool, hot tub or ocean for 6 weeks or until instructed by your doctor.

Call Your Doctor If:

- Your temperature is 101°F or higher. Low grade fever under 101°F is not uncommon.
- Your feeding tube is clogged.
- Your drain output becomes murky.
- You have significant redness around the incision or any drainage from the incision.
- Severe bleeding occurs (More than 1 soaked dressing per hour). Apply direct pressure to the area.
- Severe chest pain, new or worsening shortness of breath, abdominal pain, nausea or vomiting.
- If you cannot get in touch with your doctor, call or go to the Emergency Room immediately or dial 911.

Follow-Up

- You will receive a call from our office staff after you go home from the hospital to check on your status.
- Please make a follow-up appointment to see your physician in 14 days following your surgery.