

ROBOTIC COLON RESECTION INSTRUCTIONS

A Partial colon resection may be needed for many reasons including unresectable polyps, cancer, and diverticulitis. Your colon needs to be clean prior to the procedure to optimize results and reduce complications.

Preparing for surgery:

- Shower and shampoo your hair before surgery
- If you smoke, quit or cut down at least 4 weeks prior to the procedure
- Make arrangements for another adult to drive you to the hospital
- Most people start the bowel preparation the day before surgery but if you have tendencies to constipation, it would be a good idea to start 2-3 days before with clear liquids
- Follow the instructions for your bowel preparation and antibiotics. You will need Suprep Bowel prep kit, Flagyl and Neomycin Antibiotic

Bowel Preparation

- **1 day prior to procedure:** Clear liquids only which include coffee/tea with sweetener (no milk or milk products), water, flavored water, Gatorade, soda, apple juice, white grape or cranberry juice, iced tea, lemonade (without pulp), jello, popsicles, chicken or beef broth.
- **11am** Take two tablets of Flagyl and Neomycin
- **3pm** Take two tablets of Flagyl and Neomycin
- **4pm** Pour one bottle of Suprep into a mixing container. Add cool water to a 16oz line of container and mix. Drink two more 16oz of water over the next hour.
- **8pm** Pour one bottle of Suprep into a mixing container. Add cool water to a 16oz line of container and mix. Drink two more 16oz of water over the next hour.
- **11pm** Take two tablets of Flagyl and Neomycin
- Continue to drink clear liquids through the rest of the day and evening

Day of surgery:

- Wear loose-fitting clothes that are easy to remove. You will change into a hospital gown.
- Do not use any makeup, hairspray, or perfume.
- Remove all jewelry or body piercings. Leave any valuables at home.
- You will be asked to remove contact lenses, hearing aids or dentures.
- The preoperative nurse will insert an IV line for fluids and medications.

The procedure:

- General anesthetic and sedation are given. This will help you relax and sleep during the procedure. It will prevent you from feeling pain during the operation.
- The procedure will be robotic or minimally invasive with small incisions. This will allow to instill CO2 inside your abdomen. The surgeon will make 4 small incisions. A larger incision will be present where the specimen is removed through.
- The procedure will take anywhere from 2-4 hours, but it may take longer based on your anatomy or disease process
- A Foley Catheter is placed in your bladder to monitor your urine output throughout the procedure, this may remain after the procedure.

Hospital Stay

- After The procedure, you will be admitted to the hospital for recovery and monitoring
- You will spend anywhere from 2-5 days in the hospital based on your activity level, the more active you are, the faster you will recover. Walking is encouraged
- A multimodal pain regimen will be instituted for pain control and home medications re-started
- You will be discharged once your pain is controlled, you have shown evidence of bowel function, you can take care of yourself, and you feel ready
- Your surgeon will visit you every day and make adjustments to your management, questions are always encouraged

After discharge from the Hospital:

- Do not drive or use heavy machines if taking narcotics. Do not drink alcohol.
- Avoid heavy lifting, straining, or strenuous activities for 3-4 weeks. You are encouraged to walk
- Do not expect a normal bowel movement after you leave the hospital. Your bowel movements are likely to be watery for up to a month after surgery. This is normal, as the job of the colon is to absorb water, and you have less of it now. Anti-Diarrheal medications are discouraged
- Your first few bowel movements are also likely to include some blood, this is part of healing. However, profuse bleeding is not normal. Call your surgeon for help if this happens
- Pain medication can contribute to constipation so only take it if needed. If you feel constipated, drink plenty of fluids, try pineapple juice or prune juice, and you may take Miralax, Docusate, or Milk of Magnesia or another laxative that has worked in the past.
- Call the office for a post-operative appointment

Your wound Dressings:

- You may have a clear dressing applied. You may shower with this on. You can remove the clear dressing after 7 days.
- You may go home with an outer dressing with steri-strips across the incision. The outer dressing can be removed the following day. Do not pull off the steri-strips.
- You can shower using soap and water. Pat the area dry and do not apply any type of ointment. You do not need to apply another outer dressing unless you have drainage from the incision

Medication / Pain Relief:

- You will be given a prescription for pain medication. These are usually narcotics and can upset your stomach, so take them with some food. They can also cause constipation and are associated with addiction if abused. You do not have to take these medications
- For milder pain you can use Extra Strength Tylenol. In addition, use an ice pack on the incision during the first 24 hours following surgery; if it has been longer than 24 hours apply a heating pad. Do not fall asleep with a heating pad as it can cause burns.
- My preferred regimen for pain management includes taking tyenol 500mg every 4 hours, Ibuprofen 600mg every 6 hours (with food) and narcotics for breakthrough and severe pain.

Diet: Adhere to a **Low Fiber Diet**, this will help reduce bowel movement and stool content.

- Look for foods that have no more than 1 to 2 grams of fiber in one serving
- **Avoid** Nuts, seeds, Whole grains, popcorn, Brown rice, oatmeal, granola, wheat, quinoa, Fruits, and vegetables except for Bananas, melons, applesauce and canned peaches (no skin)
- **Choose** Tender meat, fish and poultry. Eggs, Dairy, Cereal with low fiber, Vegetable and fruit juices, bread, biscuits, pancakes, waffles.

When to call your doctor:

- Fever over 101 degrees
- Unusual drainage from the incision, such as white or green fluid. Some yellowish (serous) and red (bloody) drainage would be expected
- Red, hard, hot, or painful area around the incision
- Severe pain unrelieved by pain medication
- Persistent nausea, vomiting and inability to hold food down lasting longer than 24 hours
- Profuse bloody diarrhea that causes dizziness or passing out, some blood tinge and watery bowel movements are expected.

Contact information

- Call Intercoastal Medical Group (IMG)
- Lakewood office 941-362-8662, The answering service will be available after 5pm, and you will be able to reach the "on call" physician
- Cattleman office 941-341-0042, from 12-1 pm the answering service will be on
- You can reach Dr. Hernandez through the portal for non-urgent problems or questions

