

## Open Liver and Biliary Resection

### *How to prepare, what to expect, and self-care*

*This handout is for patients who are having open liver and biliary resection surgery at University of Washington Medical Center. It covers how to prepare for the surgery, what to expect, and self-care after going home.*

### Getting Ready

- **Hospital stay:** Plan to stay in the hospital for 3 to 5 days after your surgery.
- **Arrange for help at home:** You will need someone to help you prepare food and do other chores for 1 to 2 weeks after your surgery.
- **Stop smoking:** If you smoke, stop smoking at least 1 week before your surgery.



### Starting 5 days Before Surgery

*Plan to stay in the hospital for 3 to 5 days after your surgery.*

- **Medicines:** Do **not** take any aspirin or other medicines that affect blood clotting. These include ibuprofen (Advil, Motrin, and others) and naproxen (Aleve, Naprosyn, and others). For more information, see the list of medicines in the purple patient education packet.
- **Nutrition:** Drink your Impact Advance Recovery drink 3 times a day.

### Starting 2 Days Before Surgery

- **Shaving:** Do **not** shave any part of your body that you do not already shave every day. If you normally shave near your surgical site, do **not** shave that area for 2 days before your surgery.

### 24 Hours Before Your Surgery

- **Arrival time:** The pre-anesthesia medical assistant (MA) will call you by 5 p.m. the day before your surgery to tell you when and where to check in for your surgery. If you are having surgery on a Monday, the MA will call you the Friday before. If you do not hear from the MA by 5 p.m., please call 206.598.6334.

- **Shower:** Take a shower the night before your surgery:
  - Use the antibacterial soap the clinic nurse gave you and wash from the neck down **ONLY**. Do **not** use the antibacterial soap on your face, hair, and private parts.
  - Wash your face, hair, and private parts with your own soap and shampoo.
  - Use clean towels to dry off and put on clean clothes.
- **Apple juice:** Before midnight, drink 8 ounces of apple juice. This juice will be given to you at your clinic visit.

## **Surgery Day**

### **Before You Leave Home**

- Take a 2nd shower using the antibacterial soap the clinic nurse gave you. Follow the same instructions as were given for the 1st shower.

### **At the Hospital**

- Check in at Surgery Registration on the 2nd floor of the Surgery Pavilion at your assigned arrival time.
- You will be given 8 ounces of apple juice. You will need to drink this juice 2 hours before your surgery.
- A nurse will call you to come to the pre-op area.
- A thin, flexible tube called an *intravenous* line (IV) will be placed in your arm. You will receive fluids, antibiotics, and pain medicine through the IV.
- You will be given a heating blanket to keep you warm. This helps reduce your risk of infection.
- The Anesthesiology team will:
  - Tell you how long the surgery will last
  - Take you to the operating room

### **After Surgery**

When you wake up after surgery, you will:

- Be either in the recovery area or in the intensive care unit (ICU)
- Have an IV in your arm to give you fluids and antibiotics
- Have *sequential compression devices* (SCDs) on your legs to help with blood flow

- Use a pain pump to give yourself pain medicines through your IV
- Have a *catheter* (tube) in your incision to give you pain medicine
- Have a Foley catheter in your bladder to remove urine
- Be moved to a room on a care unit

## **Recovering in Your Hospital Room**

In your room, you will:

- Start taking sips of clear liquids, up to 1 ounce an hour
- Sit up on the edge of your bed, with help from your nurse

Your nurse will also:

- Teach you coughing and deep breathing exercises to help prevent pneumonia and *atelectasis* (incomplete opening of the lungs)
- Encourage you to use the incentive spirometer 10 times an hour
- Encourage you to walk as often as you can, as soon as you can after surgery

## **Incision Care**

- You will have a large incision in your upper abdomen. This will be closed with stitches under your skin and surgical staples over your skin. The stitches will dissolve on their own. The staples will be removed 10 to 14 days after your surgery.
- To help healing, avoid putting stress on your abdomen for 6 weeks after your surgery. Do **not** lift, push, and pull anything heavier than 15 pounds (2 gallons of milk weigh about 17 pounds).
- As you heal, a thick ridge will form along your incision. This ridge will soften and flatten out over several months.
- When you go home, you will need to check your incision every day and note any changes. Call your doctor if you notice any changes or you have any signs of infection listed on the last page of this handout.

## **Pain Control**

Right after surgery, you will have:

- A pain-medicine pump called a PCA (*patient-controlled analgesia*). The PCA enables you to give yourself pain medicine as needed.
- A catheter in your incision to give you pain medicine.

When you can handle solid foods, your PCA and pain medicine catheter will be removed and you will start to take pain medicine by mouth.

## **Nutrition**

You will not be allowed to eat anything by mouth right after your surgery, but you will start taking sips of clear liquids. You will also receive fluids through your IV to keep you hydrated.

When you can drink clear liquids and not feel nauseated, your doctor will add solid foods back into your diet. For most patients, this happens on the second day after surgery.

## **Activity**

The more you move, the faster your body will heal. Moving around is also very important to prevent pneumonia in your lungs and blood clots in your legs.

Every day, you will become more active. Here is what you can expect while you are in the hospital:

- **Day of surgery:**
  - Sit up on the edge of your bed with a nurse's help
- **Day 1 after surgery:**
  - Sit up in a chair for all your meals with a nurse's help
  - Take 3 to 4 walks in the hall with a nurse's help
  - Your goal is to walk 9 laps around the unit
  - Aim to be out of bed for 6 hours
- **Day 2 after surgery:**
  - Sit up in a chair for all your meals with a nurse's help
  - Take 3 to 4 walks in the hall with a nurse's help
  - Your goal is to walk 18 laps around the unit
  - Aim to be out of bed for 6 hours
- **Day 3 after surgery:**
  - Sit up in a chair for all your meals with a nurse's help
  - Take 3 to 4 walks in the hall with a nurse's help
  - Your goal is to walk 18 laps around the unit
  - Aim to be out of bed for 6 hours

## **Precautions and Self-care at Home**

### **Shower**

A member of your healthcare team will help you remove the big dressing that is on your abdomen 48 hours after your surgery. After this dressing is removed, you may shower every day.

When you shower:

- Let the water run over your incision. Gently wash the area with regular soap.
- Pat dry your incision with a clean towel and let the air dry it the rest of the way.
- Do not put any ointments (including antibiotic ointments) on your incision.
- Check your incision and note any changes or signs of infection.

### **First Follow-up Visit**

At your first clinic visit after your surgery, your doctor and nurse will:

- Talk with you about how you are doing at home
- Ask how your appetite is and how your bowels are working
- Check your incision
- Remove your surgical staples
- Ask how your pain is and what pain medicines you are taking
- Ask what activities you are doing, and when you plan to return to work
- Review the pathology report with you

### **Exercise**

- Walking every day will help speed your recovery. Walk a little farther each day, as you are able.
- Avoid any activity that puts any strain on your abdominal muscles for 6 weeks after your surgery. (See “Incision Care” on page 3.)
- You can go up and down stairs, but do not use a stair-climbing exercise machine, as it will put stress on your incision.

## **Return to Work**

How much time you take off work depends on what you do for a living. Most people take 4 to 6 weeks off to recover after their surgery.

Return to work when you feel ready. Some patients choose to start back part-time and work shorter days, and then work more as their energy allows.

## **When to Call**

Please call one of the numbers below under “Who to Call” if you have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 101.5 F (38 C)
- Shaking or chills
- Nausea, vomiting, or both
- Any sign of infection at your incision site:
  - Redness
  - Increasing pain
  - Swelling
  - Bad-smelling drainage
  - A change in the amount of drainage
- Concerns that cannot wait until your follow-up visit

## **Who to Call**

- Weekdays from 8 a.m. to 5 p.m., call the Surgical Specialties clinic at 206.598.4477.
- After hours and on holidays and weekends, call 206.598.6190 and ask for the Surgery B doctor on call to be paged.

### **Questions?**

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Surgical Specialties  
Center: 206.598.4477