Recovery in the Hospital

After your kidney/pancreas transplant

After surgery, you will recover in the hospital for about 3 to 7 days. Actively participating in your recovery will get you started on the right path toward taking care of yourself. Just as before your transplant, a team of health care professionals will be working with you while you are in the hospital.

Visits with the Transplant Team

Your hospital care team includes:

- Your attending surgeon, transplant fellow, transplant nephrologists, physician’s assistant (PA), surgical resident, transplant nurse coordinator, pharmacist, dietitian, social worker, and physical or occupational therapists.

- The transplant resident doctors (doctors in training) make care visits called “rounds” on transplant patients every morning. The entire transplant team will make care rounds daily in the afternoon. This is the best time for you and your family to talk with the team. Before they come, it helps to make a list of questions for them.

- The transplant unit nurses provide your daily nursing care and are a direct link with the rest of the transplant team. They can communicate your needs and concerns to other members of the transplant team.

We strongly encourage your personal support team to visit often and to be an active part of your recovery care.

Interpreters

Tell your nurse or social worker if you will need an interpreter to help you understand medical issues and all of the information you will receive during your recovery time in the hospital. Your English-speaking family or friends are encouraged to visit to help with communication about non-medical issues. You may also ask for an interpreter to be present for your scheduled team visits.

Also, please let us know if you have hearing or vision problems so that we can fully meet your needs.
To Support Your Care

Bring these items to the hospital to support your care:

- **Guide to Your Kidney/Pancreas Transplant** (re-read the Chapters “Recovery in the Hospital” through “Discharge”).
- Your home **blood pressure cuff, thermometer, and blood glucose meter**. Bring these to the hospital to make sure they are working properly.

Tubes After Surgery

After surgery, you may have these tubes in place:

- A **catheter** in your bladder to drain and collect urine. This catheter is usually removed in 3 to 4 days. If you have had bladder problems, the tube may stay in place for up to 10 to 14 days.
- An **IV line** *(intravenous catheter)* for giving fluids and medications. It is usually removed on your day of discharge.
- An **NG** *(nasogastric)* tube to keep your stomach empty. This tube is usually removed in the recovery room, but it will stay in longer if needed or if you are a pancreas recipient. The tube is removed when you have passed gas, a sign that your bowel is working again.
- **Nasal prongs** for giving oxygen, until your oxygen level is normal.
- If you have a **peritoneal dialysis tube**, it will be removed when your kidney function is stable, in about 4 to 8 weeks.
- A **stent** (plastic tube) may be placed to keep your ureter open where it goes into your bladder. As your ureter heals, this stent will be removed, usually 4 to 8 weeks after surgery.

As you recover, your doctor or nurse can give you a better idea about when each tube is likely to be removed.

Pain Management

At first, you will give yourself pain medicine through a **patient-controlled analgesia** (PCA) pump. This pump gives pain medicine through your IV line until you can take medicine by mouth.

Your nurse will explain how to control pain once you are taking oral medications. Keep your pain at a level where you are comfortable enough to participate in your own care.
Physical Activity

You will be expected to become active as soon as possible after surgery. It may be hard at first, but there are many benefits to getting up and moving around right after your surgery:

- Better healing and overall physical recovery
- Better pain control
- Relief of bloating and increased recovery of bowel function
- Lower risk of blood clots
- Lower risk of pneumonia

Your First Goals

Your first goals after surgery will be to:

- Begin doing breathing exercises using the spirometer before you leave the recovery room.
- Get up and stand by your bed the evening after your surgery.
- Walk in your room and the hallway by the next morning.

Dialysis

If your kidney has “delayed graft function,” you may need dialysis for several days to several weeks after your transplant. This is a common situation and does not mean the kidney will not work. About 20% of patients (20 out of 100) who receive a deceased donor kidney need dialysis within the first few weeks after their transplant surgery.

Eating

Your diet may be limited to sips of water or liquids at first to keep you from being nauseated. You will progress from liquids to a soft diet. Then you will add solid foods and eat a more normal diet as your bowel starts working again. For some patients, including those with diabetes, this may take longer and you may be given IV nutrition for several days. Your dietitian will help you decide which foods and snacks are right for you when you start eating again.

Bathing

You may take a sponge bath or a shower about 24 hours after surgery.

Self-Care After Transplant

Your care team will teach you some self-care activities while you are in the hospital. You will learn:
Questions?
Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

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- How to take your medications. This is a good time to read over Chapter 12, “Medications.” A pharmacist will meet with you to go over the details of your medications and your medication schedule. Then, you will be able to start taking your medications yourself during your hospital stay.
- How to take care of your incision.
- About the transplant diet. The dietitian will talk with you about details of your diet, and you will receive a booklet called Nutrition After Your Transplant.
- How to keep track of the fluid you drink and the amount of urine you make.
- Which labs and vital signs to check and record in “My Transplant Log,” Chapter 20.
- About the signs and symptoms of rejection and infection.
- About general transplant health practices.

Visitors
Visitors are welcome, but please follow these hospital policies:
- No children under age 6
- No pets
- No live plants or flowers
- No visitors with viral or bacterial infections (colds, flu, etc.)

Personal Items
Feel free to bring items from home to increase your comfort (or have your family or support person bring them for you after surgery).
- Robe
- Pictures of loved ones
- Books, handicrafts, and puzzles
- Music player
- Loose, comfortable clothing to go home in

Discharge
The transplant team will not discharge you until it is medically safe to send you home. If you need further IV medication or dialysis, it will be arranged for you as an outpatient.