Hepatic Resection and Ablation of Liver Tumors

What to expect and how to prepare for your procedure

This handout describes 2 treatments for liver tumors:

- Hepatic resection is an operation to remove the part of the liver where the tumor is.
- Radiofrequency ablation uses electrical current to heat the tumor and kill the cancer cells.

Your doctor has chosen one of these treatments. Your nurse will review what to expect and how to prepare for your procedure.
How to Prepare for Your Operation

**Things to Remember**

- **Aspirin and other medicines:** Do **not** take any aspirin or other products that affect blood clotting for 1 week before your operation. Two of these are ibuprofen (Advil, Motrin) and naprosyn (Aleve, Naproxen). See attached sheet for more information.

- **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 (48 hours) before your surgery.

- **Hospital stay:** Your stay in the hospital will depend on the type of procedure you are having done. If you are having:
  - A liver resection, you will stay in the hospital for 4 to 7 days after your operation
  - An ablation of your liver tumor, you will stay in the hospital for 1 to 3 days after your procedure

- **Help at home:** When you go home, you will need someone to help you prepare food and do household chores for 1 to 2 weeks.

- **Coughing and deep breathing:** Your nurse will teach you coughing and deep-breathing exercises. These are important to do after surgery to help prevent pneumonia.

- **Stop smoking:** If you smoke, stop smoking for at least 1 week before your operation.

---

Precautions and Self-care to Speed Your Recovery

**Shower**

You may shower every day. Do not take a bath, sit in a hot tub, or swim until your incisions are healed. This will take about 4 weeks.

**First Follow-up Visit**

At your first clinic visit after your operation, your nurse and doctor will talk with you about how you are doing at home. They will want to know how your appetite is and how your bowels are working. They will check your incision and remove your surgical staples or Steri-Strips.

Your doctor and nurse will also ask how your pain is, what pain medicines you are taking, what activities you are doing, and when you plan to return to work. Your doctor will review your pathology report with you.

**Exercise**

- Walking every day will help speed your recovery. Slowly increase how far you walk.

- Avoid vigorous physical activity for the first 6 weeks after your surgery.

**Return to Work**

How much time you take off work depends on what you do for a living. Most people take 1 to 2 months off to recover after their operation. Return to work when you feel ready. Some patients choose to start back part-time and work shorter days, then work more as their energy allows.

If you had a liver resection, it may take up to 3 months for your energy level to return to normal.
You will need someone to pick you up from the hospital and help you at home for the first week or longer.

**Nutrition**

You will not be allowed to eat anything by mouth on the day of your operation. You will receive fluids through your IV to keep you from getting dehydrated.

As your intestines recover from your operation, you will pass gas. After this happens, you will be able to drink clear liquids. When you can drink clear liquids and not feel nauseous, your doctor will add regular foods back into your diet.

**Activity**

Every day you will become more active. Moving around is very important to prevent pneumonia in your lungs and blood clots in your legs.

Your nurse will help you sit on the edge of your bed on the day of your operation. The day after your operation, you will get up and sit in a chair. You will also begin to walk. Two days after your operation, you will walk in the hall. As your strength returns, you will be encouraged to do more.

**Bowel Movements**

It will be several days after your operation before you have your first bowel movement.

If you have diarrhea that does not go away in 2 or 3 days, or nausea and/or vomiting, call your nurse. Avoid getting constipated. Please read the handout “Constipation After Your Operation.”

**24 Hours Before Your Operation**

- **Take 2 showers:** Take 1 shower the night before, and a second shower the morning of your operation. Use the antibacterial soap your nurse gave you to wash your body.

  Do **not** use the antibacterial soap on your face and hair. (See directions that came with the soap.) Use your own soap and shampoo on your face and hair. Use clean towels to dry off, and put on clean clothing.

- **Arrival time:** The pre-surgery nurse will call you by 5 p.m. the night before your operation. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call 206-598-6334. The pre-surgery nurse will tell you when to come to the hospital and will remind you:
  - Not to eat or drink after a certain time.
  - Which of your regular medicines to take or not take.
  - To sip only enough water to swallow your pills.

- **Heating blanket:** To reduce your risk of infection, you will be covered with a heating blanket to warm your body while you wait to go into the operating room. Ask for a heating blanket if you do not receive one.
What to Expect After Your Surgery

Waking Up After Your Operation
You will wake up in the recovery room. You will feel sleepy.

You will have:
- An IV (flexible tube) in your vein, which will be used to give you medicine for pain and nausea.
- **Sequential compression devices (SCDs)** on your legs. These are inflatable stockings that help with blood flow to keep blood clots from forming.

You may also have:
- An **epidural catheter** in your back to give you pain medicine. Your anesthesiologist will decide if this will help you.
- A **catheter tube** inserted into your bladder to drain your urine. You will have this catheter for 2 or 3 days.

If you have a liver resection, you may have a few more tubes and devices attached to you. After your operation, you may go to the ICU (Intensive Care Unit) to be watched closely. Then you will be moved to a regular hospital room when your doctor says it is OK.

Recovering in Your Hospital Room

Incision
Depending on the type of surgery that you have, you may have either a small or large incision in your upper abdomen. This will be closed with stitches under your skin or surgical staples. The stitches will dissolve on their own. The staples will be removed 10 to 14 days after your operation.

Not putting stress on your abdomen will improve healing. Do not lift anything heavier than 15 pounds for 5 weeks after your operation.

As you heal, there will be a thick healing ridge along your incision. This will soften and flatten out over several months.

When you go home you will be told to check your incision every day. Call your doctor if you have any of the signs of infection listed on the last page of this handout.

Pain Management
You will probably have a pain-medicine pump called a PCA (patient-controlled analgesia) for up to 3 days after your operation. This will allow you to get pain medicine when you need it. Your anesthesiologist may talk with you about also having an epidural catheter to control pain after your operation.

When you go home, use the pain medicine your doctor prescribed for you. It is important to take it before your pain is severe.

Other Symptoms
If you have had an ablation of your liver tumor, it is not unusual to have a fever or flu-like symptoms for 5 or 6 days after your operation.