Questions?

UWMC Surgical Specialties Nurse Advice Line: 206-598-4549
(weekdays 8 a.m. to 4 p.m.)

SCCA Surgical Oncology Clinic: 206-288-7555
(weekdays 8 a.m. to 5 p.m.)

After hours and on weekends and holidays, call 206-598-6190 and ask for the resident on call for Surgery to be paged.

Or, ask for your surgeon to be paged:

Dr. __________________

Whipple

What to expect and how to prepare for your operation

A whipple operation, also called a *pancreatoduodenectomy*, removes the head of the pancreas, part of the small bowel, part of the bile duct system, and part of the stomach.

Call the Nurse Advice Line or Your Doctor If You Have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Increasing abdominal pain
- Any sign of infection in your incision:
  - Redness
  - Increasing pain
  - Swelling
  - Foul-smelling drainage
  - A change in the type or amount of drainage
- Nausea and/or vomiting
- Concerns that cannot wait until your follow-up visit
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:** You will stay in the hospital for 7 to 10 days after your operation. When you go home, you will need someone to help you prepare food and do household chores for 2 to 3 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.

- **Lovenox for cancer patients:** Lovenox is a long-acting drug to thin your blood and prevent clots from forming in your legs. Your nurse will teach you or a family member how to give yourself Lovenox shots. After your operation, you will get 1 shot every day for 28 days.

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**Lovenox Shots**

If you received Lovenox shots while you were in the hospital, continue your Lovenox shots at home for 28 days after your operation.

**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.

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.

- Do not lift anything heavier than 15 pounds for 5 weeks after your operation.

- For the first 5 weeks you are home, avoid gardening, vacuuming, and any activity that puts stress on your abdominal muscles or increases your heart rate.

**Return to Work**

How much time you take off work depends on what you do for a living. People take from 1 to 2 weeks to a few months off to recover after this 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.
You will need someone to pick you up from the hospital and help you at home for the first week or longer.

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.

Lovenox Shots for Cancer Patients
If your operation is to treat cancer, your nurse will give you a Lovenox shot every day while you are in the hospital. After you go home, you will give yourself Lovenox shots. Your nurse will remind you how to do this before you leave the hospital.

Bowel Movements
It will be several days after your operation before you have your first bowel movement. Loose stools are normal at first. After you go home, your bowels may still be irregular. 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. Read the handout “Constipation After Your Operation.”

Bladder Catheter
You may have a catheter in your bladder for up to 5 days after surgery. It will be removed when you can get up and use the bathroom.

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.

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.
• A catheter tube inserted into your bladder to drain your urine.
• One or more abdominal drains (tubes), which remove excess fluid from the area of your operation.

• 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 gastrostomy tube inserted through your abdomen into your stomach. This tube will drain gas and fluid out of your stomach until your body can digest again.

• A feeding jejunostomy tube inserted through your skin into your small intestine. You will receive high-nutrition liquid food through this tube.

Recovering in Your Hospital Room

Incision Care

You doctor will discuss which incision will be used for your operation. It will be either vertical, down the middle of your abdomen, or transverse, across your abdomen. The incision will be closed with surgical staples.

Not putting stress on your abdomen will improve healing. Do not lift anything heavier than 10 pounds for 6 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 1 to 4 days after your operation. This will allow you to get pain medicine when you need it. Also, your anesthesiologist may talk with you about 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.

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.

When you wake up from your operation, you may have a gastrostomy tube and/or a feeding jejunostomy tube placed into your abdomen.

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.

If you have a feeding tube, it may be used at night to give you more calories until you can eat. If you need tube feedings at home, we will help arrange for a company to provide the supplies you will need and a visiting nurse to follow your progress. You may have the feeding tube for up to 3 months.

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.