### Before Surgery Day

<table>
<thead>
<tr>
<th>At least 2 to 4 weeks before surgery:</th>
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<tbody>
<tr>
<td>If you smoke, STOP.</td>
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</table>

**During the 2 weeks before surgery:**

- Meet with your surgeon and other members of your care team. Learn about what to expect before, during, and after surgery.
- Sign your consent papers.
- Make sure your follow-up visit is scheduled for 1 to 2 weeks after your surgery.
- Walk 2 miles a day.

**7 days before surgery:**

- Stop taking aspirin and NSAIDS (non-steroidal anti-inflammatory drugs) such as ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn)

**Starting 5 days before surgery:**

- Drink your immunonutrition supplement drink 3 times a day. If you have diabetes, drink ⅓ serving 6 times a day.

**Day before surgery:**

- Receive a call from the hospital with your arrival time.
- **Before you go to bed,** take a shower with chlorhexidine gluconate (CHG) soap:
  - Shower and shampoo with your regular soap
  - Rinse well
  - Wet a clean washcloth, then turn the shower off
  - Pour 1/2 bottle of CHG on the washcloth and use the washcloth to wash from your shoulders to your knees – include your groin crease, but **not** your private parts
  - Leave the soap on your skin for 1 minute
  - Rinse well
- **Before midnight,** drink one 8-ounce bottle of apple juice.
- **After midnight,** you may have only clear liquids. Do not take anything else by mouth.

### Surgery Day

**Before you leave home:**

- Take another shower using the same steps as you did last night.

**Starting 2 hours before your surgery, do not eat or drink anything, EXCEPT:**

- Right after you park at the hospital, drink one 8-ounce bottle of apple juice.

**At the hospital:**

- Check in at Surgery Registration (Surgery Pavilion, 2nd floor) at your assigned arrival time.
- A nurse will call you to come to the Pre-Op area.
- An intravenous (IV) tube will be placed in your arm to give you fluids and antibiotics.
- An Anesthesiologist will talk with you about the anesthesia (sleeping medicine) you will receive during surgery.
- You will receive acetaminophen (Tylenol) for pain relief.
- You will meet with nurses to review questions about your health.
- You will be given a heating blanket to keep you warm, improve healing, and lower your risk of infection. Keep the blanket on even if you feel warm enough.
- The Anesthesiology team will take you to the operating room.

**After surgery, you will:**

- Wake up in the recovery area
- Be moved to a bed in a hospital unit

**You will have:**

- An IV in your arm to give you fluids
- Compression devices on your legs to help blood flow
- A patient-controlled analgesia (PCA) machine so that you can give yourself pain medicine as needed
- A Foley catheter (tube) in your bladder to drain urine

**Your nurse will:**

- Teach you how to use your incentive spirometer (breathing device)
- Help you sit up on the edge of your bed
- Remind you to sip clear liquids, and chew on ice chips and gum to help your digestion work

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**Distal Pancreatectomy with or without Splenectomy (Robotic) CareMap**

*How to prepare and what to expect during your hospital stay*
<table>
<thead>
<tr>
<th>Day 1</th>
<th>Day 2</th>
<th>Day 3 (Discharge)</th>
<th>After Discharge</th>
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</thead>
<tbody>
<tr>
<td><strong>Medicines and Treatments</strong></td>
<td><strong>Medicines</strong></td>
<td><strong>Medicines</strong></td>
<td><strong>Medicines</strong></td>
</tr>
<tr>
<td>- You will have a PCA pain pump that allows you to help control your pain. Use this as needed.</td>
<td>- When you can handle solid food, your PCA will be stopped and you will take pain pills by mouth.</td>
<td>- Give yourself 1 enoxaparin shot every day for 28 days.</td>
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<tr>
<td>- Your Foley bladder catheter will be removed.</td>
<td>- You will be prescribed: - Stool softeners</td>
<td>- Take a stool softener or Milk of Magnesia for constipation (if needed).</td>
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<tr>
<td>- A pharmacist will review enoxaparin (blood-thinner) information with you.</td>
<td>- Pain medicine</td>
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<tr>
<td>- Your nurse will teach you how to give yourself enoxaparin injections.</td>
<td>- Enoxaparin injections for 28 days</td>
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<tr>
<td><strong>Diet</strong></td>
<td><strong>Activities and Self-care</strong></td>
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</tr>
<tr>
<td>- Eat 5 to 6 small meals a day. Eat mostly foods that are low in sugar and low in carbohydrates.</td>
<td>- Use your incentive spirometer (blue breathing device) 10 times every hour to keep fluid out of your lungs</td>
<td>- Shower and dress in your own clothes by about 9 a.m.</td>
<td>- Walk as much as you can.</td>
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<tr>
<td></td>
<td>- Staff will help you sit up in a chair for all meals and take you on 3 to 4 walks a day</td>
<td>- You can handle your diet.</td>
<td>- For 6 weeks, do not lift anything over 10 pounds (a gallon of milk weighs almost 9 pounds).</td>
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<td></td>
<td>- Aim to be out of bed 6 hours a day</td>
<td>- Your pain is under control.</td>
<td>- Do not drive or drink alcohol while you are taking opioid pain medicine (oxycodone or dilaudid).</td>
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<td>- Do not get out of bed without a nurse beside you</td>
<td>- You are passing gas or having bowel movements.</td>
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<td></td>
<td>- You received diabetes and pharmacy teaching (if needed).</td>
<td>- Call with questions or concerns: - Dr. Park’s patients: 206.598.4477</td>
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<td>- Your follow-up clinic visit is set for 1 to 2 weeks after discharge.</td>
<td>- Dr. Pillarisetty’s patients: 206.606.7555</td>
</tr>
<tr>
<td><strong>Activities and Self-care</strong></td>
<td><strong>Planning</strong></td>
<td><strong>Planning</strong></td>
<td><strong>Follow-up Care</strong></td>
</tr>
<tr>
<td>- Aim to walk ½ mile today.</td>
<td>- Know your discharge goals: - Able to eat regular foods - Pain under control - Able to walk by yourself - Pass gas or have bowel movements</td>
<td>- Meet with a social worker to talk about home healthcare or a skilled nursing facility (if needed).</td>
<td>- Go to your follow-up clinic visit 1 to 2 weeks after discharge.</td>
</tr>
<tr>
<td>- A Physical Therapist (PT) will assess you and set up a plan.</td>
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<td>- If you had a splenectomy, talk with your provider about vaccines.</td>
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<td>- An Occupational Therapist (OT) will assess you and set up a plan.</td>
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