

## SURGERY

# Day/night of surgery



### Nursing and monitoring



#### RCH staff to do

- Nurse to check vital signs frequently
- Nurse to do frequent neurovascular checks
- Give oxygen if needed
- Give IV fluids
- Use urinary catheter

#### Patients and family to do

### Pain management



- Patient to move self +/- nurses assistance into a more comfortable position

- Patient to press the green button (PCA) to help control pain
- Patient to move self +/- nurses assistance into a more comfortable position

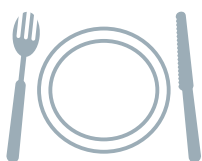
### Activity



- Nurses and family to reposition via a log roll (turning with a straight back) patient every 2 hours or as needed  
**Note:** Patient allowed to sit up in bed (Ensure patients hips are at the bend of the bed. No slumped sitting)

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**Note:** Patient allowed to sit up in bed (Ensure patients hips are at the bend of the bed. No slumped sitting)

### Nutrition/ Diet



- Patient can suck on ice chips or take sips of clear fluid as needed

If you have any questions about the above please ask your nurse

## SURGERY

# Day 1 after surgery



### Nursing and monitoring



#### RCH staff to do

- Nurse to check vital signs every 4 hours
- Nurse to complete neurovascular checks every 4 hours
- Give IV fluids
- Urinary catheter removed in the evening

#### Patients and family to do

### Pain management



- **Pain Team** review
- Stop use of green button (PCA)
- Nursing staff to give oral pain medication

- Patient to move self +/- nurses or family assistance via log roll into a more comfortable position

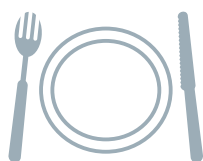
### Activity



- **Physiotherapy** review in morning and afternoon. They will help patient to:
  - Sit out of bed in chair in morning and afternoon
  - Walk outside their room

- Aim for patient to be eating, drinking and grooming self independently in bed or chair

### Nutrition/ Diet



- Give laxatives/stool softeners

- Allowed to drink clear fluids
- Allowed to eat small amounts of simple solids if tolerated
- Chew sugarless gum

If you have any questions about the above please ask your nurse

## SURGERY

# Day 2 after surgery



### Nursing and monitoring



#### RCH staff to do

- Nurse to stop monitoring when patient stable and on oral medication
- Stop IV fluids when patient taking oral fluids
- Spinal x-ray (taken in standing) in the afternoon

#### Patients and family to do

### Pain management



- **Pain Team** review
- Nursing staff to give oral pain medication

- Patient to move self (on their own or with very little help) into a more comfortable position

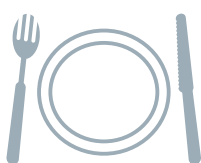
### Activity



- **Physiotherapy** review in morning and afternoon. They will help patient to:
  - Walk longer distances with less help
  - Walk outside their room
- **Occupational Therapy** review × 1 (or tomorrow) in the morning or afternoon. They will:
  - Assess getting on/off toilet
  - Provide education on daily activities

- Sit out of bed × 2-3 in the day (morning, afternoon and evening)
- Walking to/from bathroom
- Patient to be eating, drinking and grooming self independently in bed or chair
- Have a shower on a shower chair or in standing

### Nutrition/ Diet



- Continue to have laxatives/ stool softeners

- Regular diet as tolerated
- Chew sugarless gum

If you have any questions about the above please ask your nurse

## SURGERY

# Day 3 after surgery



### Nursing and monitoring



#### RCH staff to do

- Give discharge information
- Give advice on dressing and out-patient orthopaedic review
- Debulk dressing if required

#### Patients and family to do

### Pain management



- Nurses to ensure family has script for pain medication for home
- **Pain Team** to give home advice and contact details

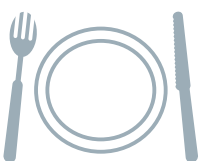
### Activity



- **Physiotherapy** review in the morning. They will help patient to:
  - Practice walking up/down stairs
  - Give advice on activity and exercise for home
- **Occupational Therapy** will ensure patient's home is set up/equipment organised for discharge

- Patient should be log rolling independently
- Patient should be transferring self out of bed and out of a chair independently or with only a little help

### Nutrition/ Diet



- Regular diet as tolerated
- Chew sugarless gum
- Continue to have stool softeners
- Patient should be drinking an adequate amount and tolerating some solid food prior to discharge
- Patient should have passed wind prior to discharge

If you have any questions about the above please ask your nurse