

Georgia Colon & Rectal

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COLON OR RECTAL SURGERY PATIENT INFORMATION

You will be scheduled for Colon or Rectal surgery. Please read the following to familiarize yourself with what you can expect from your stay. Your knowledge about the process will allow us to improve your hospitalization.

A procedure typically lasts for 2 1/2- 3 hours, but may take as long as 6 hours depending upon the specific situation. Most colon resections performed by our surgeons are Laparoscopic, or minimally invasive surgery. During a minimally invasive procedure a series of small incisions, from a quarter of an inch to four Inches, is made in the patient's abdomen. A small video camera, or scope, is placed in one of the Incisions, providing your surgeon with a magnified view of the patient's internal organs on a monitor. Surgical instruments are placed in the other incisions, allowing the surgeon to work inside and remove the diseased portions of the colon. .

Minimally Invasive procedures have been shown to be as effective as open surgery while offering many benefits over the open procedure. These benefits include:

- Shorter hospital stay-typically 2-4 days
- Less pain, less requirements for narcotics

Less scarring

Quicker recovery time- back to work in about 2-3 weeks
Factors that could preclude a patient from undergoing a minimally invasive procedure include morbid obesity, prior abdominal surgery, and dense scar tissue. Conversion to open because of bleeding problems during the procedure, large tumors, the surgeon's inability to visualize the organs, or judgment regarding safety.

BEFORE YOUR SURGERY

Prior to going into the hospital, your doctor will see you in the office so a pre-operative medical clearance can be obtained **expect this visit to take 1-3 hours**. This consists of a History and Physical Examination, which may include a Chest X-ray, Electrocardiogram, and Blood Studies. Patients with heart or lung problems may need a preoperative evaluation by a Cardiologist or Pulmonologist if suggested by your Surgeon or Anesthesiologist. Other tests such as a Radiology CT scan maybe ordered to assist us with planning of your procedure.

The day before the surgery, In most instances, your doctor will have you take some type of bowel prep in order to clean out the colon. In addition, you will typically be given a prescription for antibiotics that you take the day before surgery.

These precautions help to decrease the possibility of infection. It is important to remember NOT to EAT or DRINK anything after MIDNIGHT the night before surgery, unless specifically stated otherwise. Medications, however, can be taken with a sip of water. You should not take any Aspirin, Motrin or related products, or blood thinners such as Coumadin within 7-10 days of the procedure. This decision will be made by your surgeon and your Primary care doctor that prescribed the Coumadin. STOP herbal supplements and large doses of vitamins 10 days prior to the procedure.

DAY OF SURGERY

The hospitals that your surgeon performs surgery in have pre-op holding areas that the patients go to prior to surgery, Depending on which hospital you are scheduled for, you will need to report at least 2 hours prior to your procedure. It is very important that you arrive by the designated time, as late arrivals may force the cancellation of your surgery, In the pre-operative holding area, you will be greeted by nurses who will help you to change into a hospital gown and obtain a Nursing history. They will also make sure that all of your preoperative studies are available. The anesthesiologist will also see you during this time period, and obtain a history pertinent to anesthesia. Colon or rectal cases that are performed in an open manner, your doctor may have the anesthesiologist place an epidural catheter, prior to the start of your surgery, for control of your post-operative pain. For those undergoing a laparoscopic procedure you will *have* post operative pain controlled by a patient controlled device known as PCA.

AFTER YOUR PROCEDURE

Once your procedure is completed, you will be taken to a post-anesthesia care unit (PACU) area where you will remain for 1-2 hours. Family members are usually not permitted into the PACU, depending on the hospital rules; however, they can see you in your room later in the day. Nurses are present to monitor your vital signs and to help you wake up after your procedure. Following that you will be transferred to your room. You will find a tube in your bladder, a Foley catheter that allows us to monitor your hydration status. This will remain in place for 1-2 days following your procedure. If an open procedure is performed you may find a nasogastric (NG) tube in place to remove air and secretions from the stomach, This is typically removed upon resuming bowel function.

In order to improve recovery, your doctor usually would like you to be out of bed, sitting in a chair on the day of surgery if you were a morning case and by the next morning if your surgery was in the

afternoon or evening. Additionally, on the first post operative day we would like you walking in the hallway with the assistance of a nursing staff member. You will need to do coughing and deep breathing exercises, taught by your nurse. These exercises keep your lungs expanded, helping to prevent fever or pneumonia. You will have sequential compression hose on your legs to aid in circulation and receive heparin to decrease the formation of blood clots. For those patients undergoing minimally invasive surgery, we will start feeding you the night of your procedure, with clear liquids. Over the next day or two as bowel function returns we will advance your diet so that you will be on solid food by the time you return home.

DISCHARGE

We will allow you to go home once you are tolerating a diet. Prior to discharge from the hospital, you will receive prescriptions for pain and any other medications, along with specific instructions your surgeon wants you to follow for 2-3 weeks after your procedure. Arrangements for a visiting home nurse can be made, if needed by the case management nurse/coordinator at the hospital.

AT HOME

Typical convalescence at home takes an average of 3-4 weeks if surgery was done laparoscopically and 4-6 weeks if by open procedure. We do not want you lifting anything heavier than 10 pounds, and do not operate a car for 2-3 weeks. It is best to eat 5-6 small meals per day for 1-2 weeks and avoid fresh fruits or vegetables, as well as cut back on dairy products. These foods may keep the stool loose. Additionally, add a probiotic to your diet for at least 2 weeks to help get the bacteria in the gut back to normal. You should expect to feel tired and run down for 1-2 weeks, and may actually sleep a fair amount during the day. You should give our office a call to make a follow-up appointment within 2-4 weeks after getting home.

If you have any questions about the pre-op instructions, your procedure or recovery, please call our office at 770-277-4277 to speak with your Doctor's nurse. We appreciate you choosing Georgia Colon & Rectal Surgical Associates to care for you.