



Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Date of Surgery: \_\_\_\_\_

## Pre and Post Operative Care Instructions Colon Resection

We at Glacier Surgical wish you a speedy recovery from your procedure! The best way to do so is to follow the pre-operative and post-operative regimen as described below. Please follow the instructions to better understand what to expect in the coming weeks and how to best care for yourself in the meantime.

### **3 DAYS PRIOR TO PROCEDURE**

**Please call Mat-Su Regional Hospital at (907) 861-6855 to preregister or you can preregister in person at 2500 South Woodworth Loop, Palmer, AK 99645 (behind the fireplace).**

Mat-Su Regional Hospital will call you the day before your procedure to tell you what time to arrive at the hospital. If you have not heard from them by 2:30pm the day before your surgery, you may call our office at the number above. Read all instructions before beginning your prep.

### **Special Instructions/Medications to Hold:**

## Preparation instructions using SUTAB

### **One Day Before Your Procedure (Prep Day)**

- Upon waking, begin a clear liquid diet. The entire day you may have clear liquids ONLY, NO SOLID FOOD!
- DO NOT EAT OR DRINK ANYTHING RED OR PURPLE

**CLEAR LIQUIDS ALLOWED:** coffee, tea, water-either carbonated or regular, Gatorade (not red or purple), clear sodas (sprite/ginger ale), and clear juices (apple, pear, white grape), Jell-O (without fruit chunks), clear soups (bouillon or broth), sugar, and artificial sweeteners.

**NOT ALLOWED ON A CLEAR LIQUID DIET:** Milk, cream, soymilk equivalent, artificial creamer, juices with pulp (orange, grapefruit, pineapple, tomato, V-8) and alcohol are NOT allowed.

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## **IF YOUR ARRIVAL TIME IS 10AM OR BEFORE, YOUR FIRST PREP DOSE IS AT 4PM AND YOUR SECOND PREP DOSE IS AT 9PM**

**If your arrival time is after 10am, follow the times listed next.**

### 1<sup>st</sup> Prep Dose

- **At 5 pm the day prior to your procedure, begin your first dose.**
- **Step 1** — Open the first bottle of 12 tablets. Then fill the container provided to the 16 ounces fill line.
- **Step 2** — Swallow each tablet by mouth with one sip of water, then finish drinking the water over 15-20 minutes.
- **Step 3** — 1 hour after you swallowed the last tablet, drink an additional 16 ounces over 30 minutes.
- **Step 4** — 30 minutes after **Step 3**, drink an additional 16 ounces over 30 minutes.
- **NOTHING TO EAT AFTER, MAY CONTINUE WATER UP TO 11PM**

### 2nd Prep Dose

- **Step 1** — Start at 5 to 8 hours prior to the procedure, but no sooner than 4 hours from when you started dose 1.
- **Step 2** — Open the second bottle containing 12 tablets.
- **Step 3** — Repeat steps 1-4 from first prep dose.
- **Step 4** — Be sure to complete all doses 2 hours before your scheduled colonoscopy.
- **NOTHING TO PASS THROUGH LIPS AFTER COMPLETED**

### Note

- Refrain from taking oral medications within 1 hour of starting each dose, they will not be absorbed properly.
- Refrain from taking any other laxatives while using SUTAB.
- If you take tetracycline or fluoroquinolone antibiotics, iron, digoxin, chlorpromazine, or penicillamine, take these medications at least 2 hours before and not less than 6 hours after administration of each dose of SUTAB.
- If you experience preparation-related symptoms of nausea, bloating, or cramping, then you should pause or slow the rate of drinking the additional water until your symptoms diminish.
- Day of surgery please wear loose comfortable clothing. DO NOT wear any jewelry, makeup, lotions, or fingernail polish. Any rings that are too snug to be removed should be removed by a jeweler and left at home. ALL piercings or studs need to be removed and left at home.

### After Surgery:

- You will experience pain around the incision site- you will be prescribed pain medication.
- Swelling and discoloration is normal and will disappear.
- You will likely be admitted for around 2-5 days postoperatively.

### Driving and Work:

- It is recommended not to get behind the wheel of a vehicle until you have been free of medication and without excessive pain for a minimum of two days.
- Depending on how you feel, returning to work can take anywhere from a one to two weeks- use your best judgment based on how you are feeling. Make sure to keep in contact with your employer and your doctor in order to stay up to date on any documentation you may need.

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### At Home Care:

- **Showering is allowed the day after surgery.** There will be surgical glue on the incisions that will fall off on its own.
- **No soaking or submerging under water (Baths, Hot Tubs, Pools, etc.) for one week.**
- **Refrain from covering your incisions from any sort of cream.** This will not aid in healing.
- **A low fiber diet will be recommended for the first few weeks after surgery.**
- **It may take anywhere from one to five days to pass a bowel movement and it might take a couple of months for normal bowel function to return.** There is no cause for concern unless it is accompanied with nausea or abdominal pain. You may experience more flatulence than usual; this is also normal. Some experience diarrhea and some experience constipation. Unless you are experiencing bowel issues that last an unusual amount of time or accompanied by unusual pain, irregularities are normal and should not be a cause for concern. For constipation, be sure to talk to your doctor about taking a laxative to minimize the strain on your incision.

### Physical Activity:

- **There is a lifting, pushing and pulling restriction of 10 to 15 pounds for four to six weeks after surgery.** In general, use your best judgment-If it doesn't feel good, don't do it.
- **Soreness is normal.** You will also feel fatigued and easily drained for a couple of weeks- again, use your best judgment. To reiterate, you should be fine for any non-lifting physical activity. Try to listen to your body when you feel pain and work around that.
- **It is important to practice ten deep breaths and two coughs each hour, for at least half of the day.** This should be done for the first week to reduce the risk of pneumonia and other lung problems. When coughing, place a pillow over your incision and *gently* press inward to reduce the pressure from coughing on the incision.

### Call Your Doctor If....:

- You break a fever over 100 degrees or have an elevated heart rate above 100 beats per min.
- You have uncontrollable shaking and chills.
- Sudden shortness of breath or chest pain.
- Passing out
- You feel pain that does not subside over a long period of time.
- You experience redness, excessive heat, or pus draining from your incisions.
- You have nausea or an inability to drink fluids that does not go away.

I have read and understand the above instructions.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Patient/Guardian

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