



University Hospital  
Southampton  
NHS Foundation Trust

# Preparing for surgery

Information for patients and visitors



**We have given you this booklet because you may be having a surgical procedure in the future with University Hospital Southampton NHS Foundation Trust (UHS).**

This booklet contains important information on how to prepare for surgery. It also explains how improving your physical and mental health before your surgery can help with your recovery, so please make sure you take time to read it and keep it in a safe place.

Your surgeon and anaesthetist will provide you with more specific information about your surgery at your pre-surgery hospital appointments. Please read the information you are given alongside this booklet.

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## Our perioperative care services

Perioperative care is the name given to all care that helps you to prepare for and recover from surgery. Before your surgery, we will ask you to come into hospital for several appointments. These appointments will help us to assess your general health and plan your care. During these appointments, you will find out what to expect from your surgery and what you can do to improve your health before your surgery.

### Fit for surgery school

Fit for surgery school is a 90-minute interactive, online-based education session. We invite everyone having major surgery to attend. During the session we will:

- provide you with information that will help support you in your preparation for surgery
- inform you of the most common complications after surgery and how to reduce the risk of these
- prepare you for what to expect during your stay in hospital

### High risk shared decision-making clinic

Some long-term health conditions can put you at a higher risk of complications after surgery. If this is the case, we may ask you to attend a high risk shared decision-making clinic so we can discuss your risks from surgery. You will have the opportunity to tell us what is important to you and ask any questions you may have. During this appointment, we may also perform some tests, such as blood tests and a cardiopulmonary exercise test (CPET). A consultant will explain the results of these tests to you and give you a personalised preparation plan.

### Perioperative anaemia

Anaemia is a condition where you do not have enough red blood cells to carry the oxygen your body needs. Around one in three people who have surgery are anaemic. Being anaemic can increase your risk of complications and can slow down your recovery after surgery.

Before your surgery, we will ask you to have a blood test to check for anaemia. If the test result shows that you are anaemic and iron deficient, we will arrange for you to have some iron before your surgery. The iron may be in tablet form or via an intravenous infusion (where iron in liquid form is given directly into your vein).

We may also perform some further investigations to find out the reason for your anaemia.

### Cardiopulmonary exercise test (CPET)

A cardiopulmonary exercise test (CPET) is a non-invasive test used to assess how your heart, lungs and muscles respond to exercise. As part of the test, we will ask you to cycle on a stationary exercise bike.

The information from your CPET will help us predict how your body will respond to the stress of surgery.

The test itself will last approximately 10 to 15 minutes, but the appointment can take up to one hour in total.

We will use your test results to:

- estimate your personal risk from surgery
- plan an exercise programme for you

### Pre-assessment clinic appointment

Before your surgery, we will ask you to attend a pre-assessment clinic appointment. This appointment may be in person, or it may be a video or telephone call. During the appointment, a nurse practitioner will:

- ask you questions about your health, medical history and home circumstances
- give you information on each of the different types of anaesthesia
- explain what to expect on the day of your surgery and whether you should stop taking your usual medications before going into hospital

You may also have a discussion with a consultant anaesthetist.

## The importance of preparing for surgery

Taking an active role in preparing for your surgery will help you feel more in control, will help speed up your recovery and may help you get home quicker.

When you prepare for your surgery, always remember that doing something (no matter how small) to improve your health is better than doing nothing. Every change you make can help improve your recovery after surgery.

## The risks of surgery

All surgical procedures have a risk of complications. The most common complications are:

- chest infection
- kidney injury
- wound infection
- blood clots
- confusion

These complications can result in a longer stay in hospital, a delayed recovery and may even cause longer-term health issues. It is not possible to completely remove the risk of these complications. However, small changes to your diet, exercise levels and lifestyle in the weeks leading up to your surgery can help to reduce the risks.

## Making changes to your lifestyle: Exercise

### Increase your exercise levels

Increasing your exercise levels in the days and weeks before your surgery will make you stronger and allow your body to cope better with the physical stress of surgery.

Doing exercise on a regular basis also has many long-term health benefits, including reducing your risk of:

- cancer and cancer recurrence
- heart disease and stroke
- dementia
- having falls in the future
- mental health conditions such as depression

It's never too late to start getting active. Fitness can always be improved, no matter your age or physical ability. As little as two to three weeks of increased exercise before surgery has been shown to improve a person's recovery.

### Tips on how to increase your exercise levels

You can increase your exercise levels by:

- choosing an activity you enjoy
- choosing an activity that can fit into your daily routine
- planning how and when you will do the activity (write down some goals)
- gradually building up how much exercise you do
- identifying things that might get in the way of you doing the activity (you can then plan around these obstacles)
- keeping a diary of what you have achieved (this will help to keep you motivated)
- planning rewards for when you achieve your goals

### Aerobic exercise

Aerobic exercise is exercise that causes you to get out of breath.

Over a period of one week, adults should aim for:

- 150 minutes (20 minutes a day) of moderate-intensity aerobic activity (for example, fast walking, mowing the lawn, doubles tennis or vacuuming) **or**
- 75 minutes of high-intensity aerobic activity (for example, running, swimming, skipping, dancing or climbing the stairs) **or**
- a combination of moderate and high-intensity aerobic activity

If you haven't exercised for a while, you should start with 10 minutes a day and gradually build up to achieving these goals.

### Measuring the intensity of exercise

The intensity of the exercise is very important in reaching your goal.

The 'talk test' is a simple way to measure the intensity of exercise. When you are doing moderate-intensity activities, you should be able to talk but not sing. When you are doing high-intensity activities, you should not be able to say more than a few words before having to take a breath.

Another way to measure the intensity of exercise is to use the Borg Rating of Perceived Exertion (RPE) scale.

The Borg Rating of Perceived Exertion (RPE) scale			
Exercise intensity level	Exertion rating		Description
Low	0	Nothing at all	You will not be out of breath.
	1	Just noticeable	You could continue the exercise or activity all day.
	2	Very slight	You could continue the exercise or activity for hours.
	3	Slight	You will be able to hold a conversation without getting out of breath.
	4	Slight to moderate	You will be able to speak a few sentences while carrying out the exercise or activity.
Moderate	5	Moderate	You will still be able to hold a conversation, but you will need to make an effort to keep going with the exercise or activity.
	6	Some difficulty	You will find it slightly harder to breathe and you will find it takes more effort to keep going with the exercise or activity.
	7	Moderately severe	You will be able to speak in short sentences, but you will need to make a constant effort to keep going with the exercise or activity.
High	8	Severe	You will struggle to say more than two to three words at a time, and you will need to concentrate fully to keep going with the exercise or activity.
	9	Very severe	You will be almost completely out of breath and find it difficult to speak at all.
	10	Maximal shortness of breath	Maximal effort. You will be completely out of breath and unable to talk.

When using the RPE scale, think about how out of breath you feel when exercising, as well as how tired your legs are. This will help you to understand what exercise intensity level you are performing at.

For moderate-intensity exercise, you should aim for an exertion rating in the range of 5 to 7. For high-intensity exercise, you should aim for an exertion rating in the range of 8 to 10.

### Interval training

Interval training consists of repeated periods of high-intensity exercise followed by low-intensity exercise or periods of recovery. For example, 30 seconds of very fast walking where you are out of breath (high-intensity) followed by one to two minutes of slow walking (low-intensity recovery).

Moderate to high-intensity interval training (HIIT) should be prioritised before your surgery as this has been shown to improve physical fitness faster than other types of exercise.

If you have any concerns about exercising at a moderate to high intensity level, please contact us.

## Making changes to your lifestyle: Nutrition

### Eat a healthy well-balanced diet

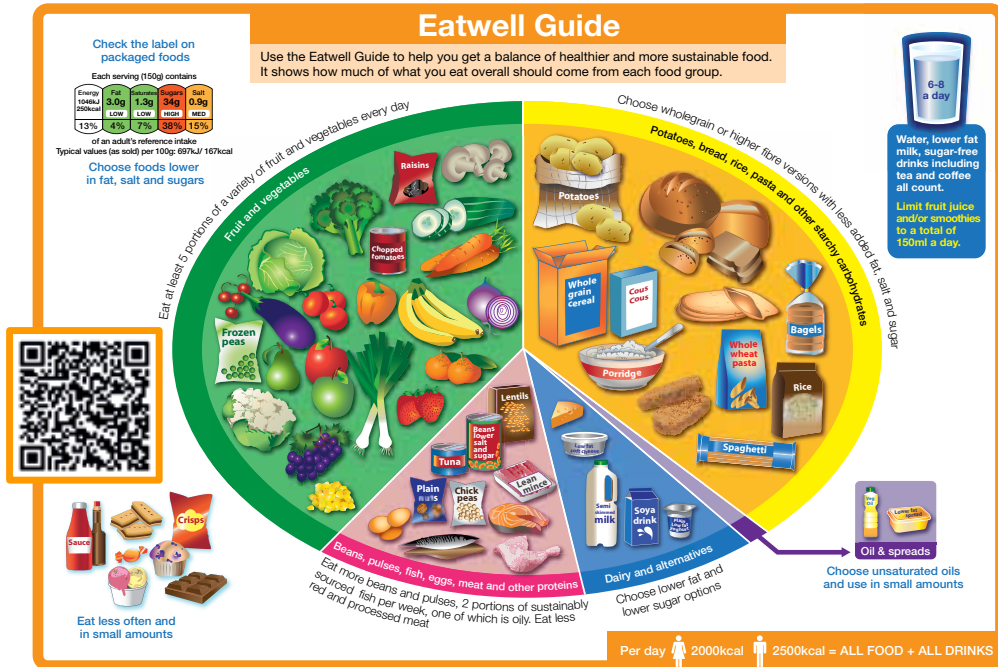
Eating a healthy well-balanced diet is an important part of preparing your body for surgery. It will also help with your recovery.

Depending on your weight, your surgeon may recommend you follow a special diet before your surgery. If this is the case, they will provide you with more information about this.



# The Eatwell Guide

The Eatwell Guide below breaks down the amount of food we should eat from each of the different food groups. For more information about the Eatwell Guide, and to view the images and text in larger scale, please visit: [www.nhs.uk/live-well/eat-well/food-guidelines-and-food-labels/the-eatwell-guide](http://www.nhs.uk/live-well/eat-well/food-guidelines-and-food-labels/the-eatwell-guide)



Source: Public Health England in association with the Welsh Government, Food Standards Scotland and the Food Standards Agency in Northern Ireland © Crown copyright 2016

## Fruit and vegetables

Fruit and vegetables should make up a third of your total food intake. You should aim for a minimum of five portions of fruit and/or vegetables a day. They can be fresh, frozen, canned or juiced. We recommend only having one juiced variety a day due to the higher sugar content. Try to eat a wide range of colours of fruit and vegetables, as they all contain different vitamins and minerals.

## Protein (beans, pulses, fish, eggs and meat)

Protein is essential for wound healing. Choose fish or lean cuts of meat like

chicken and mince where possible. Try to avoid red and processed meat like bacon, ham and sausages.

Pulses, such as beans, peas and lentils, are good alternatives to meat because they are low in fat and they are a good source of fibre and protein.

You should try to have two portions of oily fish a week, such as salmon, trout, herring or mackerel. Oily fish is high in omega 3, which helps reduce inflammation in the body.

If you choose not to eat animal products, an alternative Vegan Eatwell Guide can be found on The Vegan Society's website: [www.vegansociety.com/resources/downloads/vegan-eatwell-guide](http://www.vegansociety.com/resources/downloads/vegan-eatwell-guide)

## Starchy carbohydrates (bread, pasta, potatoes and rice)

Carbohydrates are our main source of energy and should make up a third of the foods we eat.

If you are able to, try to choose higher fibre and wholegrain varieties, such as brown rice, wholewheat pasta or brown bread. You can also leave the skin on any potatoes that you cook. These will all give you more fibre and help you feel fuller for longer.

**Do not increase your fibre intake if your medical team have advised you to follow a low-fibre diet.**

## Dairy and dairy-free alternatives

These are needed for protein and calcium. Try to aim for three portions of dairy or dairy-free alternatives each day (for example, a small matchbox-sized piece of cheese, 200ml of milk and a small pot of yoghurt). If you're trying to lose weight, try to choose low-fat options, and if you're trying to gain weight, try to choose high-fat options.

For dairy-free alternatives, such as soya or nut milks, try to choose those with added calcium, vitamin B12 and vitamin D.

When choosing dairy or dairy-free products, try to avoid those labelled as 'organic' as they will not contain added calcium, vitamin B12 and vitamin D, which you would benefit from.

### Oils and spreads

Oils and spreads are needed in a balanced diet for essential fatty acids, which help the body to absorb fat-soluble vitamins A, D, E and K. They are all high in calories, so should only be eaten in small amounts. Rapeseed oil and olive oil are the lowest in saturated fat, which is better for your heart.

### Fluids

It is recommended that you drink six to eight large glasses of fluid every day. You should choose water, skimmed milk and sugar-free soft drinks where possible, and limit juices and smoothies to 150ml per day (unless you are told otherwise by your dietitian).

On hot days or days when you are more active, where you find yourself sweating more, you may need to drink more fluids during the day to keep hydrated. You can tell how hydrated you are by looking at the colour of your urine. If your urine is light in colour, you are hydrated. If your urine is dark in colour, you may need to drink more fluids (unless you have been given a specific fluid restriction or requirement by your medical team).

## Managing your weight

Being a healthy weight before your surgery will improve your recovery. You can check if you are a healthy weight by working out your body mass index (BMI). You can work out your BMI on the NHS website:

[www.nhs.uk/health-assessment-tools/calculate-your-body-mass-index](http://www.nhs.uk/health-assessment-tools/calculate-your-body-mass-index)

The World Health Organization (WHO) suggests a healthy BMI is between 20 and 25kg/m<sup>2</sup>.

### If you are underweight, losing weight or have a reduced appetite

Being underweight increases your risk of complications from surgery and slows down the recovery process. If you lose your appetite and/or experience unintentional weight loss, your body might not be getting the right amount

of calories and nutrients it needs to maintain a healthy immune system and physical strength.

To help stabilise your weight and/or help you gain weight, try to:

- avoid drinking fluids before or with meals as this can make you feel full
- avoid eating large portions of fruit and vegetables as these can be filling but will not help with weight gain
- eat higher calorie foods and increase the amount of healthy fats you eat (for example, nuts and oils)
- fortify your food with extra calories where possible (for example, adding whole milk, butter and cream to your mashed potatoes)

If you continue to lose weight unintentionally and have already tried the tips above, you may need additional calorie supplements. Please contact our team using the details at the end of this booklet. We will assess your weight and refer you to a dietitian for specialist advice if needed.

### If you are overweight

Being overweight increases the risk of complications during surgery and may lead to a longer stay in hospital. If your BMI is 25 or over, we may advise you to lose some weight before your surgery. If you are having cancer surgery, it is important that you speak to your clinical team before losing weight. It may be safer for you to maintain your weight during cancer treatments.

To lose weight safely, it should be done slowly. You should aim for a realistic and sustainable weight loss of around 1 to 2lbs (0.5 to 1kg) each week.

To help you achieve this, we recommend:

- having three regular meals and two low-calorie snacks per day
- reducing the portion size of your meals and limiting carbohydrates to a quarter of your plate
- choosing wholegrain varieties of carbohydrates
- reducing your intake of fatty meats (for example, choosing lean meats instead of red or processed meats)
- bulking your meals out with vegetables
- limiting your intake of high-fat and sugary snacks (for example, crisps and chocolate)

- choosing low-fat dairy options
- looking at the colour-coded food labels to monitor the salt, sugar and fat content
- watching for hidden calories in drinks (sugary soft drinks often contain more calories than you may think)
- keeping a record of what you are eating (this will allow you to track your calorie intake)

## Making changes to your lifestyle: Mindfulness

### Looking after your mental health

Many people feel stressed or anxious about having surgery. This is normal. A little anxiety can be a useful motivator to help you prepare for your surgery. However, too much stress and anxiety can slow down your recovery. We recommend that you spend 20 minutes a day doing activities you find relaxing to support your emotional wellbeing. For example, you could:

- do some gentle exercises (such as yoga)
- do some mindfulness exercises (such as meditation)
- read
- listen to music
- take a walk outside (get some fresh air)

If you have been experiencing stress and/or anxiety for more than two weeks and it is having an impact on your ability to do your normal daily activities, we recommend contacting your general practitioner (GP) for advice.

## Making changes to your lifestyle: Behaviours

### Stop smoking

If you are a smoker, stopping smoking before your surgery is one of the best changes you can make to improve your health. If you stop smoking before your surgery, you are more likely to have:

- a faster recovery and a shorter stay in hospital
- better wound healing

- a reduced risk of heart and lung complications
- less pain after your surgery

Stopping smoking permanently will also reduce your risk of heart disease, stroke, cancer and early death. The earlier you stop smoking, the better.

You are up to four times more likely to stop smoking for good if you receive help from an NHS stop smoking service. These services offer non-judgemental advice, nicotine replacement therapy and behavioural support. Find out where your nearest NHS stop smoking service is online at: [www.nhs.uk/smokefree](http://www.nhs.uk/smokefree)

Alternatively, call the free Smokefree National Helpline on **0300 123 1044** to speak to a specialist adviser.

### Cut down on alcohol

Drinking above the recommended limits of alcohol is known to be linked to many medical conditions. The Department of Health advise that: *'to keep health risks to a low level, it is safest not to drink more than 14 units per week. For adults who drink as much as 14 units per week, it is best to spread this evenly over 3 days or more.'*

Type of drink	Number of alcohol units
Single small shot of spirits* (25ml, ABV 40%)	1
Alcopop (275ml, ABV 5.5%)	1.5
Small glass of red, white or rosé wine (125ml, ABV 12%)	1.5
Bottle of lager, beer or cider (330ml, ABV 5%)	1.7
Pint of lower-strength lager, beer or cider (ABV 3.6%)	2
Standard glass of red, white or rosé wine (175ml, ABV 12%)	2.1
Can of lager, beer or cider (440ml, ABV 5.5%)	2.4
Large glass of red, white or rosé wine (250ml, ABV 12%)	3
Pint of higher-strength lager, beer or cider (ABV 5.2%)	3
Bottle of red, white or rosé wine (750ml, ABV 13.5%)	10

\*Gin, rum, vodka, whisky, tequila and sambuca. Large (35ml) single measures of spirits are 1.4 units.



People who drink four units or more of alcohol a day are 50% more likely to experience complications after surgery, such as heart complications, infections and bleeding episodes. To help reduce your risk of these complications, we recommend that you cut down your alcohol consumption in the month before your surgery. If you are drinking large amounts of alcohol, you should seek the advice of a health professional before cutting down.

You can help reduce your alcohol intake by:

- setting a limit and sticking to it
- planning other activities for when you would usually be drinking
- eating before you start drinking
- avoiding buying drinks in rounds
- limiting the time you spend with heavy drinkers
- switching to low or 0% alcohol beer or lager
- planning at least two alcohol-free days each week

If you drink alcohol on a regular basis, you may find it difficult to stop. For help and advice on cutting back on the amount of alcohol you drink, please contact our team.

## Preparing for your surgery

### What to bring

You should only bring essential items into hospital with you (things that you will really need). Try to keep your hospital bag as small as possible (a small hand-luggage sized suitcase is ideal).

#### Essential items

- Toiletries (soap, toothbrush, toothpaste, shampoo, mouthwash and dental floss)
- Sanitary towels and/or tampons
- Razor and shaving materials
- Comb or hairbrush
- Books or magazines
- A small amount of money
- Notebook and pen
- Electronics and chargers (consider labelling these with your name)

### Clothing and footwear

Pack loose, comfortable clothes, as you may have drips or drains attached that the nursing staff need to regularly access.

Items of clothing we advise packing include:

- button down shirts
- cardigans
- shorts
- jogging bottoms
- dresses
- well-worn slippers (with backs) or trainers with good grip on the soles (after surgery, your feet and ankles may swell so it is a good idea not to wear brand new shoes or slippers as your feet may not fit into them)

### Medications

You should pack a few days' supply of any prescribed medications, along with a list of the doses for each medication. Please keep all your medications in their original containers, as we cannot use them if they have been transferred into anything else.

### Preparing your home

Before coming into hospital, it is a good idea to plan for when you return home. For example, we recommend stocking up your freezer to make it easier for when you return home.

You should also remember that you will not be able to:

- lift anything heavy for at least six weeks after your surgery (heavy lifting is anything more than a full kettle of water or 3kg), unless advised otherwise by your surgical team
- drive for 48 hours after having any type of anaesthetic
- drive until you have fully recovered from your surgery (how long this takes will depend on the type and severity of your surgery, but it can take up to six weeks or more)

If you are unsure about when you can start driving again, contact your surgical team and insurance company for advice.

Always inform your insurance company of any changes to your health.

Please let us know of any issues that may affect you going home after your surgery **before** you come into hospital.

## Two days before your surgery

You will need to wash your whole body and hair with an antimicrobial skin cleanser. This may be called Hibiscrub, Octenisan or Dermol 500. We will give the antimicrobial skin cleanser to you at your pre-assessment clinic appointment. This cleanser will help prepare your skin for surgery.

## The night before your surgery

You will be able to eat as normal the night before your surgery. If possible, we advise bulking out your evening meal with carbohydrates (such as rice, potato or pasta). This will help your body store energy for the day ahead.

**In the six hours before your surgery, it is important that you only have clear fluids (water or squash).**

**You should not eat or drink anything for two hours before your surgery (except essential medications with a sip of water).**

**Some people may be given a pre-operative drink to take before their surgery. If this is the case, your surgical team will explain how and when to take this.**

## The day of your surgery

On the day of your surgery, you will need to wash your whole body and hair again with the antimicrobial skin cleanser. This will help prevent wound infections.

We will usually admit you to hospital on the day of your surgery, but sometimes, it may be the day before. We will perform some health checks, such as taking your blood pressure, temperature and heart rate, to check you are well and are able to have the surgery.

You will also be seen by an anaesthetist who will talk you through your anaesthetic and pain relief options. They will also be able to answer any questions you may have.

If you are happy to go ahead with the surgery, we will ask you to read and sign the consent forms for your surgery.

We will then measure your legs and give you a pair of compression stockings to wear, along with a hospital gown.

## After your surgery

### Walking

It is essential that you get out of bed and walk around as soon as possible after your surgery. Walking is very important for your lung function and helps prevent pneumonia (inflammation of the lungs) and other complications. It will also speed up your recovery and help you get home sooner.

The day after your surgery, a physiotherapist or a nurse will help you get out of bed and walk a short distance. You should aim to walk a bit further each day until you can eventually do this unaided. If you usually use walking aids, please bring them into hospital with you.

### Position in bed

As well as walking, it is also important to get out of bed and sit in a chair every day when you are awake. While you are in bed, you should try to sit as upright as possible, rather than lying flat or being slumped. Sitting up improves the function of your lungs and helps prevent pneumonia and other lung complications which can prolong your stay in hospital and slow down your recovery.

## Breathing exercises

After your surgery, you may find that it is difficult to take deep breaths and cough. This is normal, but it can affect your lung function and lead to complications, such as pneumonia. To help prevent this, it is important that you do a breathing exercise called the 'active cycle of breathing technique (ACBT)' every hour that you are awake while you are in hospital.

The ACBT is made up of three parts that form a cycle (as shown on the next page):

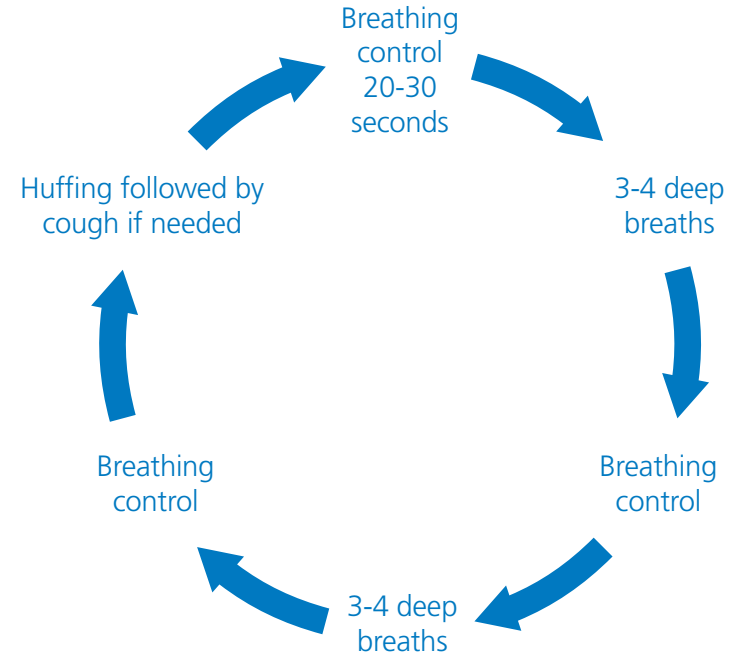
- breathing control
- deep breaths
- huff or cough

For more information about the ACBT, please visit:

[www.uhs.nhs.uk/Media/UHS-website-2019/Patientinformation/Respiratory/The-active-cycle-of-breathing-technique-ACBT-747-PIL.pdf](http://www.uhs.nhs.uk/Media/UHS-website-2019/Patientinformation/Respiratory/The-active-cycle-of-breathing-technique-ACBT-747-PIL.pdf)

We recommend that you start doing this breathing exercise before your surgery to help build up your muscle strength.

After your surgery, the physiotherapists or nurses on the ward will remind you how to do the exercise and check your technique to make sure you are doing it correctly.



## Managing pain

After your surgery, it is important that you are comfortable enough to cough, take deep breaths, walk and do exercises. We will prescribe you different forms of pain relief medication after your surgery to ensure your pain is controlled to allow you to do these things.

It is important that you take pain relief medication regularly while you recover, as it can take a little while for some medications to take effect and some have stronger effects when taken regularly.

Not moving because of pain will slow down your recovery and may lead to complications. If pain is preventing you from taking deep breaths, coughing or walking, let your nursing team know so that more pain relief medication can be arranged.

## Nutrition after surgery

Nutrition is key for healing and recovery. However, it is normal for people to have a reduced appetite after surgery and, in some cases, feel nauseous (sick) while they recover. For this reason, it is important that during your stay in hospital you ask your nurse if you need nutritional supplement drinks. These drinks come in a variety of flavours and contain concentrated nutrients to help you recover from surgery. Choose a flavour you can tolerate and try to finish three nutritional supplement drinks a day.

If your appetite is reduced while you recover from surgery, you should:

- eat things that are high in calories
- try to eat little and often
- request full-fat milk and snacks from the drinks trolley
- order double puddings (subject to availability)
- ask your visitors to bring in food and snacks that you like
- prioritise eating carbohydrates and protein over vegetables
- try eating cold, plain, dry foods (if you are feeling nauseous)

## Mouth care

Good mouth care after surgery reduces the risk of chest infections. We recommend that you brush your teeth two times a day for two minutes, especially while you are in hospital recovering. This includes brushing the top of your tongue and the roof of your mouth. We also recommend using dental floss and mouthwash.

## Resting and sleeping

It is important that you rest when you are feeling tired. If you are a light sleeper, consider bringing in aids to help you sleep, such as ear plugs and eye masks.

## Going home

When the medical team caring for you feel you are medically fit, you will be able to go home. We advise having a friend or family member pick you up from hospital if possible.

We will give you a discharge summary to take home with you. This is a document that will contain:

- details of your surgery
- details of any complications
- details of your recovery
- the medications you are going home taking
- plans for your follow-up care
- plans for your wound care (for example, removal of stitches or staples)

We will also send a copy of this discharge summary to your GP.

## Wound care

We will check your wounds before you go home. If you need any further wound care after going home (for example, you need to have your stitches removed or you need your dressing changed), your surgical team will discuss this with you and arrange for this to be done by your GP and community teams.

## Recovering at home

It is normal to feel a bit more tired than usual when you first return home. We advise you to build up to your normal level of activity slowly and wear the compression stockings until you are at your normal level of activity, as this will help reduce your risk of blood clots.

## Glossary

**Aerobic exercise:** Exercise that causes you to get out of breath and helps improve your heart and lung health.

**Anaemia:** A condition where you do not have enough red blood cells to carry the oxygen your body needs.

**Anaesthetic:** Medicines that are used during tests and surgical operations to numb sensation in certain areas of the body or send you to sleep.

**Anaesthetist:** A specialist doctor that provides the anaesthetic in operations.

**Antiseptic:** A substance that stops or slows down the growth of bacteria.

**Complications:** Problems that occur after a procedure or treatment.

**Compression stockings:** Knee-high socks designed to help with blood flow and prevent blood clots.

**Cardiopulmonary exercise test (CPET):** A non-invasive exercise test performed to assess the function of the heart and lungs during strenuous exercise.

**Discharge summary:** A document written by your doctors to explain your time in hospital and your follow-up care plan.

**Intramuscular:** Into a muscle.

**Intravenous:** Into a vein.

**Mindfulness:** An awareness of our thoughts, feelings and body sensations.

**Nutrition:** The taking in and use of food by the body.

**Perioperative care:** Medical care over a period before, during and after your surgery.

**Pre-assessment:** A process where you will be asked about your health, medical history and home circumstances. Some tests may also be carried out.

## Contact us

If you have any questions or concerns before your surgery, please contact us.

### Perioperative care team

Telephone: **023 8120 5469** (Monday to Friday, 8am to 4pm)

Mobile: **07468 708651**

Email: **POM@uhs.nhs.uk**

## Useful links

### UHS: Perioperative care

[www.uhs.nhs.uk/departments/perioperative-care](http://www.uhs.nhs.uk/departments/perioperative-care)

### Centre for Perioperative Care

[www.cpoc.org.uk](http://www.cpoc.org.uk)

### Royal College of Anaesthetists:

#### Preparing for surgery – Fitter Better Sooner

[www.rcoa.ac.uk/patient-information/preparing-surgery-fitter-better-sooner](http://www.rcoa.ac.uk/patient-information/preparing-surgery-fitter-better-sooner)

### NHS: Live Well

[www.nhs.uk/live-well](http://www.nhs.uk/live-well)





# Join our family of Southampton Hospitals Charity supporters with a monthly donation!

Making a monthly donation is a wonderful way to show your ongoing support to patients and staff at University Hospital Southampton. Even a small amount can make a BIG difference!

- £5** could pay for a toy in the children's hospital waiting area
- £10** could pay for a sensory kit to help patients with dementia
- £25** could help pay for complimentary therapies for patients with cancer



The Direct Debit Guarantee. This guarantee should be retained by the payer.



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit Southampton Hospitals Charity will notify you (normally 10 working days) in advance of your account being debited or as otherwise agreed. If you request Southampton Hospitals Charity to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit, by Southampton Hospitals Charity or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when Southampton Hospitals Charity asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

**\*Gift Aid Statement** – I am a UK Income or Capital Gains taxpayer. I have read this statement and want Southampton Hospitals Charity to reclaim tax on my donations. I understand that I must pay an amount of Income Tax and/or Capital Gains Tax in the tax year at least equal to the amount of tax that all the charities and Community Amateur Sports Clubs I donate to will reclaim on my gifts for that tax year. I understand that other taxes such as VAT and Council Tax do not qualify.

## Yes, I would like to support the hospital with a monthly donation to Southampton Hospitals Charity

### 1. My details

Title: \_\_\_\_\_ Forename: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Please write your email address above if you'd like to receive updates on how your gift is helping as well as other ways you can help.

### 2. Regular giving

I would like to make a regular monthly gift of: £5  £10  £25  OR my choice of £

monthly by Direct Debit. Please debit my account on the following day of the month: 1st  15th

### 3. Make my gift worth an extra 25%

If you have not already done so, please make every pound you give worth an extra 25% to the Charity at no extra cost to you by ticking this Gift Aid declaration.

*giftaid it*

Yes, I am a UK taxpayer and want to Gift Aid this donation and any donation I make in the future or have made in the past four years to Southampton Hospitals Charity

No, I am not a UK taxpayer

I understand that, if I pay less Income Tax and/or Capital Gains Tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference. Please notify Southampton Hospitals Charity if you wish to cancel this donation, change your name or home address, or no longer pay sufficient income and/or Capital Gains Tax.

### 4. Instructions to your Bank or Building Society to pay by Direct Debit

Name(s) of Account Holder(s):

Originator's Identification Number:

6	9	1	2	1	3
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Charities Aid Foundation, 25 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4TA

Account Number:

Sort Code:



Banks and Building Societies may not accept Direct Debit instructions from some types of account.

**Instruction to your Bank or Building Society.** Please pay Charities Aid Foundation re Southampton Hospitals Charity Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Charities Aid Foundation re Southampton Hospitals Charity and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s):

Date:

You can also set-up your monthly donation online via our website – [southamptonhospitalscharity.org/donate](https://southamptonhospitalscharity.org/donate) or by scanning the QR code.

### 5. What to do now

Please return this form to our Freepost address: Freepost RRUА-CSKX-JUBZ, Southampton Hospitals Charity, Mailpoint 135, Southampton General Hospital, Tremona Road, Southampton, SO16 6YD.

REG001

Charity Number: 1051543

University Hospital Southampton NHS Foundation Trust  
Southampton General Hospital  
Tremona Road  
Southampton  
SO16 6YD

Main switchboard telephone: **023 8077 7222**

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For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **[www.uhs.nhs.uk/additionalsupport](http://www.uhs.nhs.uk/additionalsupport)**

**[www.uhs.nhs.uk](http://www.uhs.nhs.uk)**

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