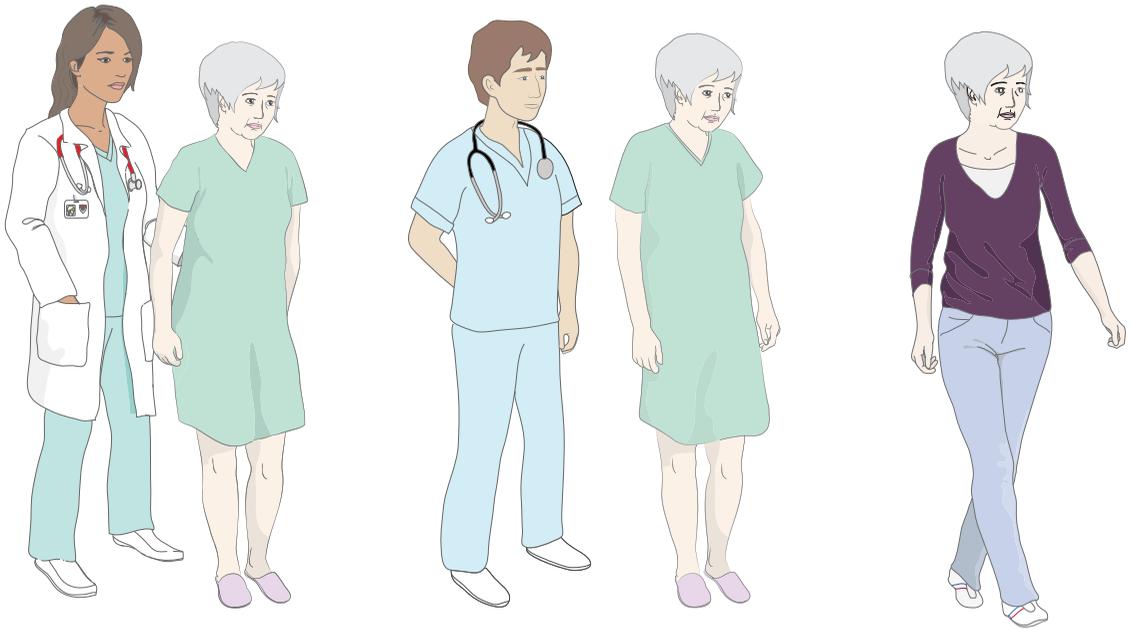


A Guide to Gallbladder Surgery



This booklet will help you understand and prepare for your surgery.
Bring this booklet with you on the day of the surgery.

www.muhcpatienteducation.ca

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Patient Education Office

PRET SURE

Parcours de rétablissement chirurgical du CUSM
MUHC Surgery Recovery Program

This booklet was developed by the MUHC Surgical Recovery (SURE) working group and reviewed by the surgeons.

We would like to recognize the MUHC Patient Education Office for their support throughout the development of this booklet, the design and layout, as well as for the creation of all the images.

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IMPORTANT

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.



This material is also available through the
MUHC Patient Education Office website
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What is a clinical care pathway ?

When you are admitted to the hospital for a gallbladder surgery, you will be part of a program called a Clinical Care Pathway. The goal of this program is to help you recover quickly and safely. Your health care team worked together to create this pathway.

This booklet will:

- Help you understand and prepare for your surgery.
- Explain how you can play an active part in your recovery.

Research shows that you will recover faster if you do the things explained in this booklet. There are instructions about eating and drinking, exercising, and controlling your pain. These things will help you to feel better faster and go home sooner.

Bring this booklet with you on the day of your surgery. Use it as a guide during your hospital stay and even after when you go home. Hospital staff will review it with you before you go home.

Having surgery can be stressful for patients and their families. The good news is that you are not alone. We will support you each step of the way. Ask us if you have questions about your care.

Your MUHC surgery team

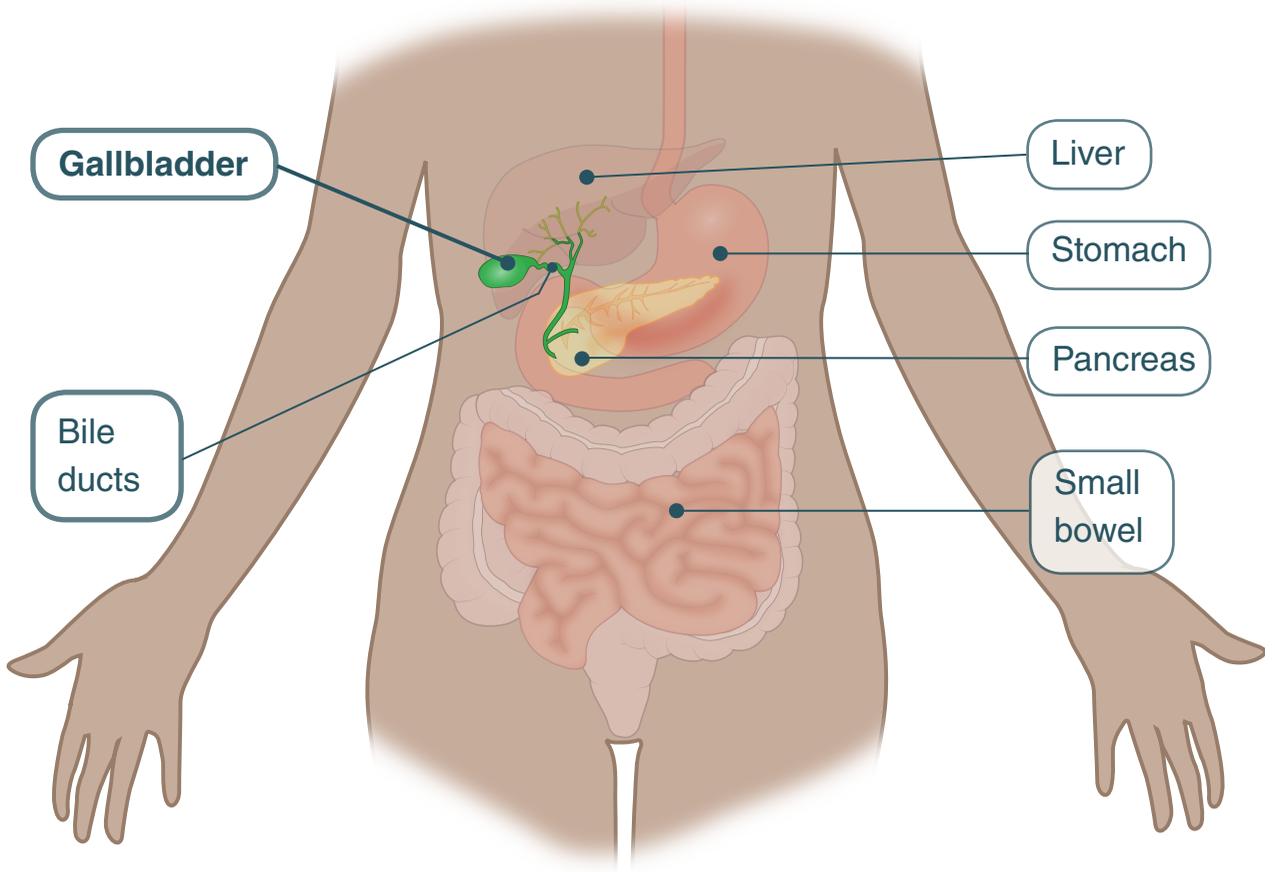


If you are not comfortable communicating in French or English, bring someone to translate for you.

What is the gallbladder ?

The gallbladder is a pear shaped organ found under the right side of your liver. The gallbladder stores extra digestive liquid (bile) made by the liver.

After eating, the gallbladder releases bile. The bile travels through narrow tubes (bile ducts) into the small bowel to help with food digestion.

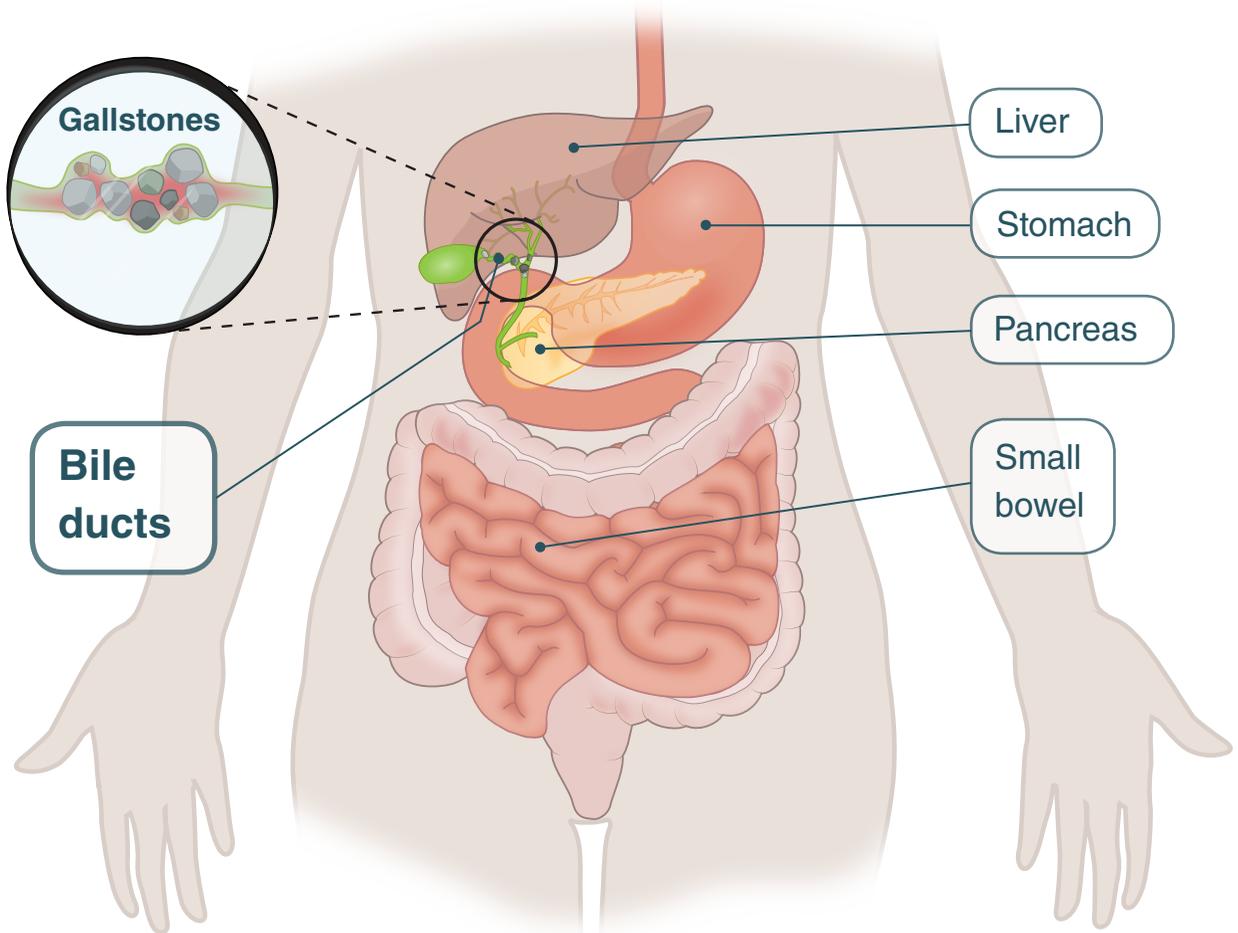


What are Gallstones ?

Gallstones are formed from cholesterol and bile salts. They can vary in size from a few millimeters to a few centimeters.

The most common reason to have your gallbladder removed is when one or many gallstones block the passage of bile from the gallbladder causing bile to build up.

This may cause pain, nausea and vomiting. **Food can still be digested without a gallbladder.**

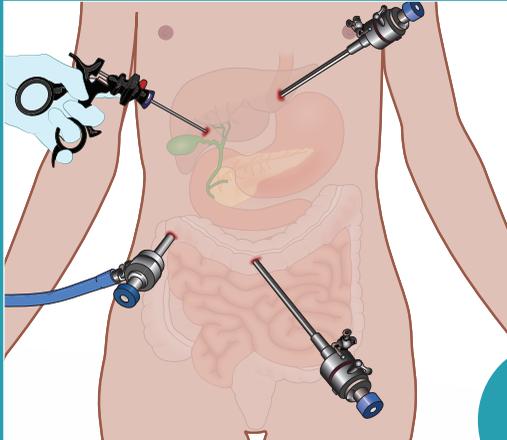


What is Gallbladder surgery ?

Surgery to remove your gallbladder is called a **cholecystectomy**.

The surgery can be done 2 ways:

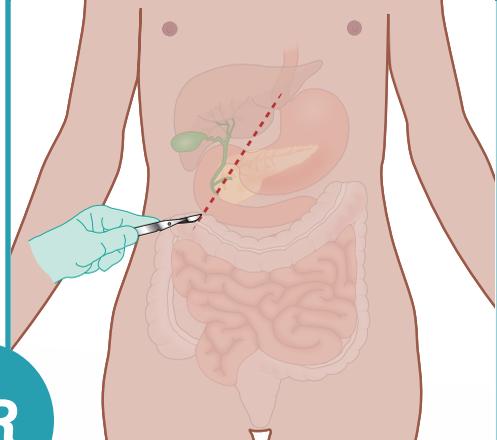
1. Laparoscopic



The surgeon makes 4 small cuts on your belly. A camera is placed into one of these cuts and helps the surgeon to see.

The instruments are placed into the other cuts and act as hands to help the surgeon remove your gallbladder.

2. Open



The surgeon makes one longer cut on your belly to remove your gallbladder.

OR



This booklet is for patients having laparoscopic surgery and who return home on the day of their surgery.

Preparing for your surgery

Be active

Exercise will help your body be as fit as possible. If you are already exercising, keep up the good work. If you are not, start slowly adding exercise into your daily routine.

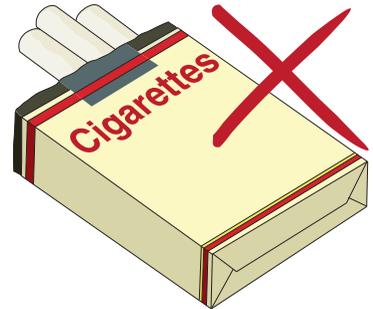
Exercise does not need to be hard to make a difference. A 30 minute walk every day is far better than not exercising at all.



Stop smoking

If you smoke, quitting smoking for good is a step that will have the greatest impact on improving your health. Quitting is possible even if you are a long time heavy smoker and have tried to quit many times in the past. It is never too late to start!

Your doctor can help you stop smoking and talk about options with you. See page 26 to learn more.



Restrict alcohol

Do not drink alcohol for 24 hours before surgery. Alcohol can interact with some medications you will receive in the hospital.

Let us know if you need help decreasing your alcohol use before surgery.



Preparing for your surgery

Plan ahead

After your surgery, you may need help with meals, bathing, laundry, and cleaning. Stock your fridge and freezer with food that is easy to reheat.

Make plans with your family and friends so you will have the help you need after your surgery.



Arrange transportation

Arrange to have a responsible adult with you to take you home from the hospital and stay with you **for the first 24 hours after your surgery.**

You will not be allowed to leave the hospital alone. You CANNOT drive yourself or take a taxi home by yourself.



Your surgery will be cancelled if you do not have someone to take you home and stay with you for the first 24 hours after your surgery.

Preoperative Clinic visit

During your Preoperative Clinic visit, you will:

- Meet with a nurse who will tell you how to get ready for your surgery and what to expect on the day of your surgery.
- Meet with a doctor who will ask you questions about your health. If you have medical problems, you may be referred to another doctor (a specialist) before surgery.

You may need to stop taking some medications and natural products before your surgery. The doctor will tell you which medications you should stop and which ones you should keep taking before the surgery.

Also, you may:

- Have blood tests.
- Have an ECG (electrocardiogram).



If you have any questions, contact the Preoperative Clinic nurses at 514 - 934 - 1934, ext. 34916, Monday to Friday from 7 a.m. to 3 p.m.

RVH Preoperative Clinic: Located near the cafeteria at DS1.2428 (Block D, level S1).

Phone call from Admitting

The day before your surgery, the Admitting Department will phone you to tell you what time to come to the hospital (if your surgery is scheduled on a Monday, the hospital will phone you the Friday before). They will ask you to arrive 2 hours before your surgery.

Exception: If your surgery is planned for 7:30 a.m., they will ask you to arrive at 6:30 a.m.

The time of surgery is not exact.
It may be earlier or later than planned.



Date of surgery: _____

Time of arrival at the hospital: _____

Room: Registration, Surgery and Intervention Centre, Block C, level 3 (C03.7055). Enter the building through the Royal Victoria Hospital main entrance. Take the first set of elevators (North) and go to the 3rd floor. These are the first set of elevators you will see.



If you do not receive a call by 2 p.m. the day before your surgery, contact the Admitting Department: 514 - 934 - 1934 ext. 31557

Cancelling your surgery

If you are sick, pregnant, or for any reason you are unable to come to the hospital for your surgery, **call as soon as possible** your surgeon's office **and** the Central Operating Room Booking (CORB): at 514-934-4488, between 9 a.m. – 11 a.m. and 1 p.m. – 3 p.m.

If you call after 3 p.m., leave a message on the answering machine stating: your full name, date of surgery, telephone number, hospital card number, surgeon's name, your reason for cancelling or postponing your surgery and the timeframe you are not available to have the surgery.

If you need to cancel your surgery the day before after 3 p.m. :

- Call the Admitting Department at 514-934-1934 ext 31557.



The Royal Victoria Hospital is a Transplant and Cardiac Centre. This means that your surgery may need to be delayed or cancelled because of an emergency. Your surgeon will reschedule you as soon as possible.



Washing

The night before surgery



Use regular soap for your face and shampoo your hair.



Take a shower with 1 of the 2 sponges you were given.

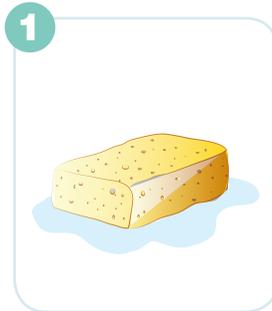


Wash yourself from the neck down and carefully clean your belly button.



Wear clean clothes (nightgown, pyjamas) to bed.

The morning of surgery



Take a shower by using the 2nd sponge you were given.



Do not apply lotion, perfume, makeup, nail polish and do not wear jewelry or piercings.



Do not shave the area where the surgery will be done.



Put on clean, loose, and comfortable clothes.

Diet

The nurse in the Preoperative Clinic will explain what to eat and drink before your surgery.

The evening before surgery:

- Eat and drink normally until midnight.
- Drink 1 carbohydrate drink (clear juice) during the evening (see list on the right).
- Drink it within 10 minutes.
- **After midnight, do not have any food, dairy products, or juice with pulp.**



Carbohydrate drinks: Choose only 1	Amount in mL	Amount in cups (1 cup = 250 mL)
 Apple juice	850 mL	
 Commercial iced tea	1100 mL	
 Cranberry cocktail	650 mL	
 Lemonade without pulp	1000 mL	
 Orange juice without pulp	1000 mL	

The morning of surgery:

- **Do not eat any food.**
- Drink 1 carbohydrate drink (clear juice) 2 hours before your surgery (see list on the right).
- Drink it within 10 minutes.
- Stop drinking 2 hours before your surgery. This is usually the same time as you are asked to arrive at the hospital.

Exception: If you are asked to arrive around 6:30 a.m. Stop drinking at 5:30 a.m.

- **Do not have any dairy products or juice with pulp.**



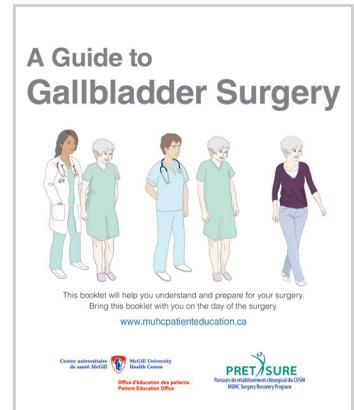
Carbohydrate drinks: Choose only 1	Amount in mL	Amount in cups (1 cup = 250 mL)
 Apple juice	425 mL	
 Commercial iced tea	550 mL	
 Cranberry cocktail	325 mL	
 Lemonade without pulp	500 mL	
 Orange juice without pulp	500 mL	

What to bring to the hospital

- This booklet.
- Medicare card and hospital card.
- List of medications that you take at home (ask your pharmacist to give you one).

If needed

- Bring your glasses, contact lenses, hearing aids, dentures, and their storage containers labeled with your name.
- Bring your cane, crutches, walker, labeled with your name.
- Bring your CPAP machine labeled with your name.



Do not bring anything of value, including credit cards and jewelry.

The hospital is not responsible for lost or stolen items.



At the hospital

Admitting area

Report directly to **Registration, Surgery and Intervention Centre, Block C, level 3 (C03.7055)**, at the time given.

Enter the building through the Royal Victoria Hospital main entrance.

Take the first set of elevators on your right or left (North) and go to the 3rd floor.

In the Preoperative admitting area, your nurse will:

- Ask you to change into a hospital gown.
- Make sure your personal belongings are in a safe place.
- Complete a Preoperative checklist with you.



In the operating room

A patient attendant (orderly) will bring you to the operating room.

In the operating room, you will meet your anesthesiologist (the doctor who will put you to sleep) and the other members of the surgical team.

You will be asleep and pain-free during your surgery.

At the hospital

Waiting room

- Family and friends may wait for you in the **waiting room** located at **C03.7158** (Block C, level 3, room 7158).
- The Post-Anesthesia Care Unit (PACU) nurse will call the family member of friend you have chosen to tell them how you are doing shortly after you arrive in the PACU. The nurse will call a 2nd time when you are ready to go home.
- There are no visitors allowed in the PACU.

Internet access

There is free WiFi available at the hospital.

Connect to:

Network: CUSM-MUHC-PUBLIC

Username: public

Password: wifi



Other resources

- **Cafeteria** : Located off the Adult Atrium on the level S1.
- **Vending machines**: Block C, level S1.
- **Stores / Restaurants / Coffee shops**: Galleria, RC (Ground floor) level & Atrium, level S1.
- **Bank machines**: Blocks C, D & RC (Ground floor) level.
- **McConnell Resource Centre (patient library)**: Block B, RC (Ground floor) level, room BRC.0078.
- **Prayer and meditation room** : Block C, level 2, room 0310.4 (C02.0310.4).

Post-Anesthesia Care Unit (PACU) - Recovery Room

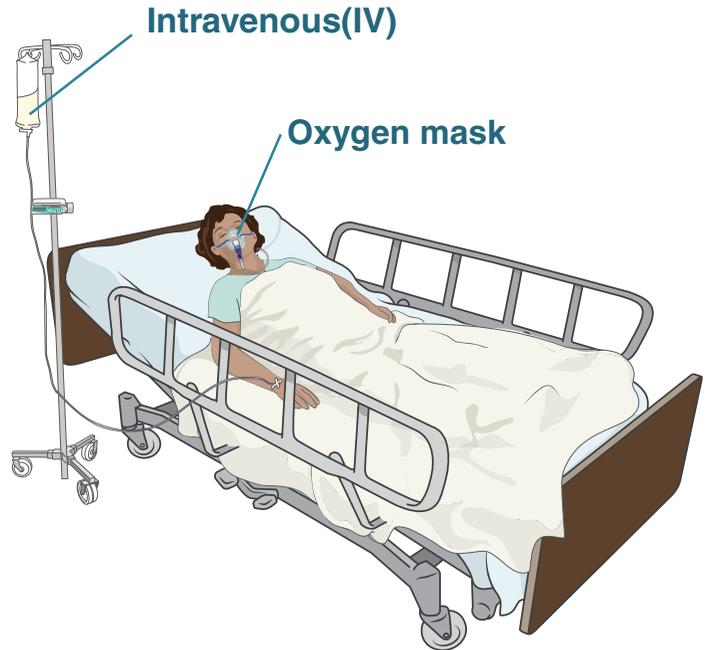
After your surgery, you will wake up in the Post-Anesthesia Care Unit (PACU), also called the **Recovery Room**.

You will have:

- An intravenous (IV), giving you fluid and medications.
- An oxygen mask, giving you oxygen.

Your nurse will:

- Check your bandage(s).
- Ask you if you have pain.
- Check your pulse and blood pressure often.
- Make sure you are comfortable.



You will stay in the PACU until you are ready to go home (about 2 hours). This period of time varies with each patient.



Remember you must have someone to take you home and to stay with you for the first 24 hours after your surgery.

Pain control

Pain relief is important because it helps you:

- Breathe better.
- Move better.
- Sleep better.
- Recover faster.
- Eat better.

Your nurse will ask you to rate your pain on a scale from 0 to 10. Your nurse will give you medications if you have pain. Our goal is to keep your pain score below 4/10.



0 means no pain and 10 is the worst pain you can imagine. This will help your nurse decide how to best manage your pain.

Do not wait until the pain gets too bad before telling us.

You may have neck and shoulder pain for the first few days after your surgery due to the gas put into your belly. This will go away by itself.

Pain

You may have some pain during the first few days following surgery.

You will receive a prescription that includes:

- Acetaminophen (Tylenol®).
- A medication against pain and swelling (anti-inflammatory).
- A stronger pain medication (narcotic).

Tell your surgeon if you are allergic to any of these medications or if you are already on Aspirin® or an anti-inflammatory medication. Take acetaminophen (Tylenol®) and the anti-inflammatory medicine first to relieve your pain. If you still feel pain 30 minutes after taking the acetaminophen (Tylenol®) and the anti-inflammatory, you should also take the narcotic medication.



If the anti-inflammatory and pain medication (narcotic) cause burning or pain in your stomach, stop taking them right away and call your surgeon.



Do not drink any alcohol for 24 hours after your surgery or while you are taking pain medication.



Pain medication may cause constipation. To help your bowels stay regular:

- Drink more.
- Eat more whole grains, fruits and vegetables.
- Get regular exercise (30 minute walk every day is a good start).
- Take stool softeners prescribed by your surgeon.



Diet

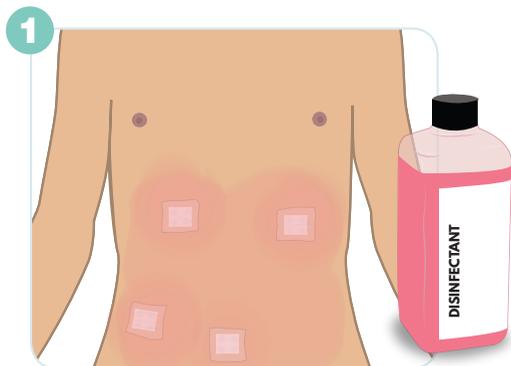
You can eat and drink anything you want.



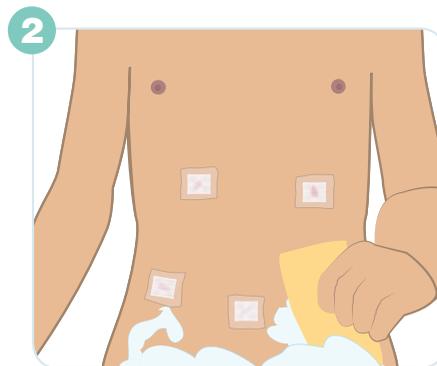
Nausea

Some patients may have nausea (may feel like vomiting) after their surgery. If you are nauseous, take the medications prescribed. Slowly start drinking clear fluids and gradually increase how much you drink as long as you feel ok.

Incisions

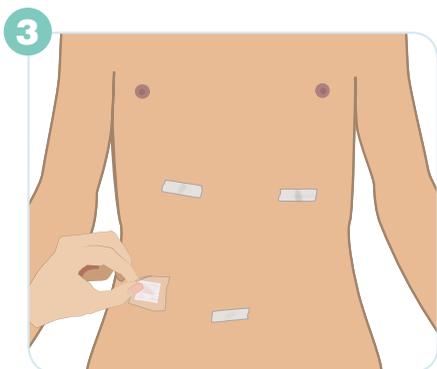


You may notice a pink coloring on your belly. This is the soap that was used in the operating room. It will wash off once you shower.

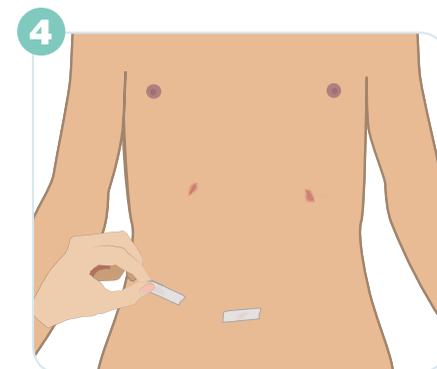


You will have 4 small plastic bandages on your belly.

The bandages are waterproof so you can take a shower after your surgery.



Remove the bandages 2 days after your surgery. Each small cut will be covered with thin pieces of tape called steri-strips. Do not remove these pieces of tape yet.



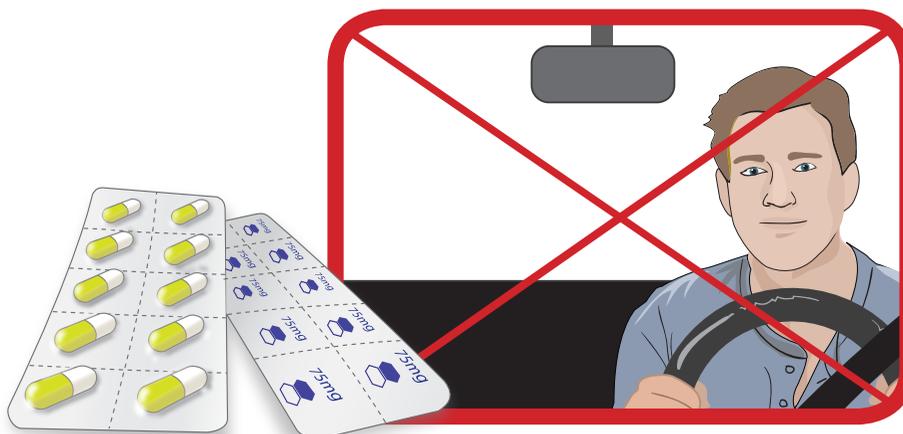
If after 7 days the pieces of tape have not peeled off, you may remove them yourself.

Activities

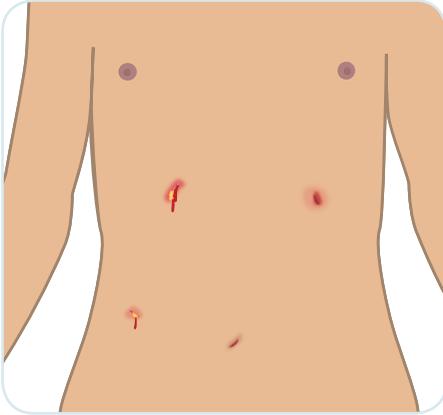
There is no restriction on your activities after your surgery. Listen to your body. You may feel more tired after your surgery, so rest. You may begin all your normal activities once you feel ready (including work, exercise and sexual activity, etc.)



You are not allowed to drive for the first 24 hours after your surgery or while you are taking the stronger pain medication (narcotic).



Call your surgeon if...



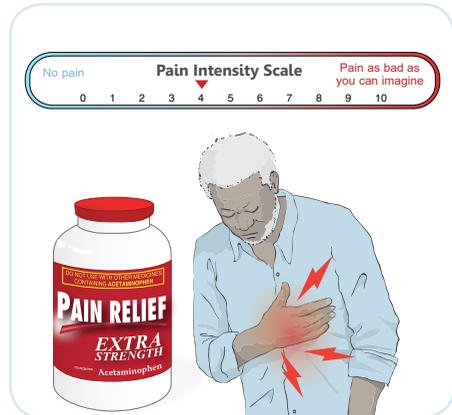
Your incision(s) are warm, red or you see pus coming from it.



You have a fever higher than 38°C/100.4°F.



You cannot drink or keep liquids down (nausea or vomiting).



You have more pain and your pain medication does not help.



If you cannot reach your surgeon, go to the nearest Emergency Department.

Follow up

You may receive a phone call from the PACU (Recovery Room) nurse the day after your surgery. The nurse will phone to see how you are doing.

About **3 weeks after your surgery**, you will need to see your surgeon.

Once at home, call the following number to set up a follow-up appointment.

Call the MUHC Appointment and Referral Centre: 514 - 934 - 8488

Name of your surgeon: _____

**If you have questions, contact the PACU (Recovery Room) nurse:
514 - 934 - 1934 ext: 38019**

Websites of interest

On gallbladder removal surgery:

www.muhclibraries.ca/cholecystectomy

On gallstones:

www.muhclibraries.ca/patients/health-topics-a-z/gallstones/

For more about anesthesia:

www.cas.ca/english/patient-information

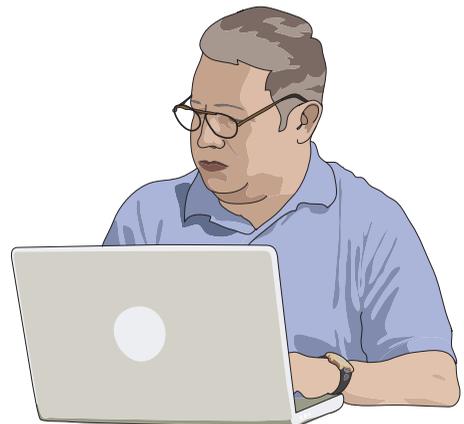
MUHC Patient Resource Centre:

Health information for patients and their caregivers

<http://www.muhclibraries.ca/patients/>

Resources to help you stop smoking:

- **Quit line** : 1-866-527-7383 (free) or www.iqitnow.qc.ca
- **Quit Smoking Centers, ask your CLSC for information**
- **The Quebec Lung Association:** 1-888-768-6669 (free) or : www.pq.lung.ca
- **Smoking cessation clinic at the MUHC: send the consultation by fax:**
514-934-8488 (requires referral from your doctor)

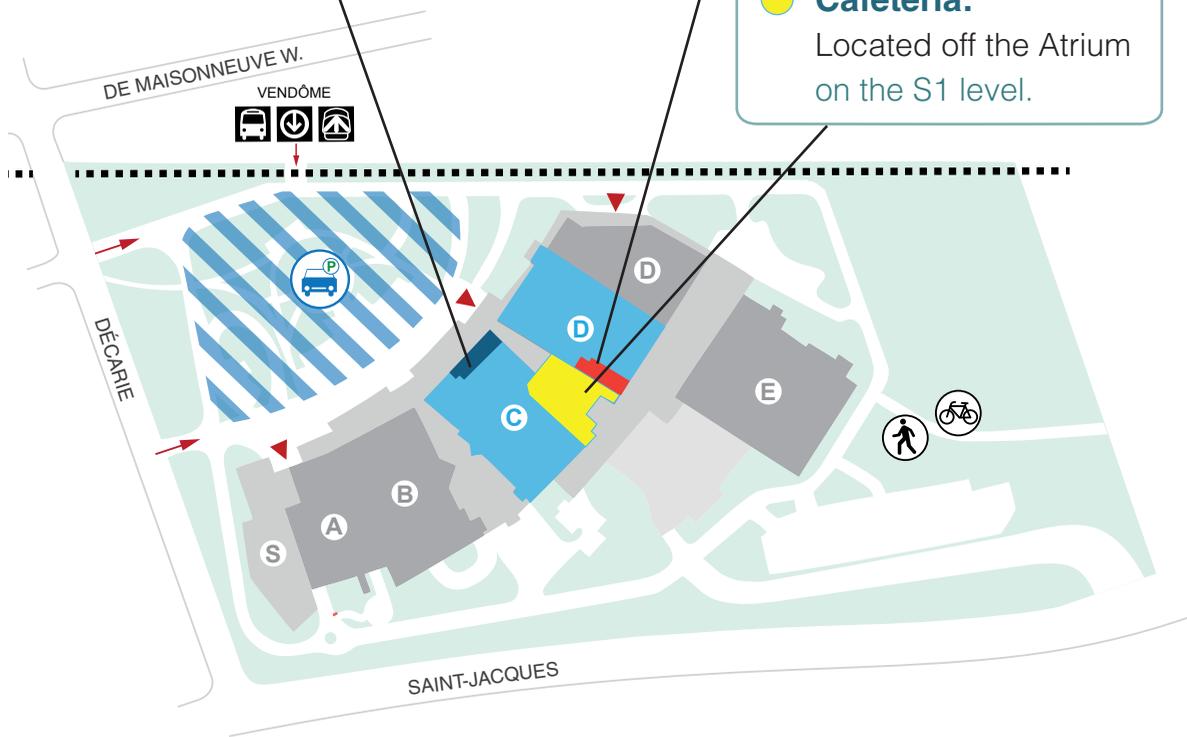


Map of the Royal Victoria Hospital at the Glen site

● **Registration, Surgery and Intervention Center:**
C03.7055

● **RVH Preoperative Clinic:**
Located near the cafeteria on DS1. 2428
(Block D, level S1).
514-934-1934, ext. 34916
Monday to Friday, 7 a.m. to 3 p.m.

● **Cafeteria:**
Located off the Atrium
on the S1 level.



Centre universitaire de santé McGill  McGill University Health Centre

Office d'éducation des patients
Patient Education Office

Glen site: 1001 Décarie Blvd. Montreal, QC H4A 3J1

A + B Montreal Children's Hospital
C + D **Royal Victoria Hospital**
D Montreal Chest institute
D Cedars Cancer Centre

E MUHC Research Institute
S Shriners Hospitals for Children
▶ Main Entrances
 Underground Parking (patients and visitors)