Your Colon Resection

You are scheduled to have Colon Resection Surgery. The purpose of this handout is to help you know how to prepare for this surgery and what to expect during your surgery.

It is the hope of the surgery staff that you will feel that you receive very good care while you are a patient in our hospital. **We are here to serve you!** Please feel free to ask any questions that you have.

**What is a Colon Resection?**

“Colon” is another name for the large intestine. Some people call this the bowel. A colon resection is a type of surgery in which a large part of the colon is removed. This is done through an incision (cut) made through the wall of the abdomen. A colon resection may be done for a number of reasons. Some reasons include:

- Ulcerative colitis—long-term inflammation of the colon that has led to permanent damage.
- Crohn’s Disease—a chronic disease in which there is inflammation of the lower portion of the small intestine.
- Diverticulitis—small pouches that form in the lining and wall of the colon that have become inflamed.
- Cancer of the colon.
- Volvulus—twisting of the colon on itself that has led to a blockage.
- Polyp—a growth from the wall of the colon that may cause a blockage or has become malignant (cancerous).
- Bowel Obstruction—a blockage in the bowel caused by scar tissue or other causes.
- Necrotic Bowel—an area of the colon that has died from lack of blood supply.
What should I do before my surgery?

• You may be asked by your doctor to take a laxative or an enema the night before your surgery. If the doctor tells you to do this it is very important that you follow his instructions.
• You will need to shower the night before your surgery and the morning of your surgery with the special soap that you are given.
• Do not eat or drink anything after midnight the night before your surgery.
• Please do not chew gum. (This raises the level of acid in your stomach.)
• You may brush your teeth and rinse your mouth as long as you do not swallow any water.
• If you are taking any medicine for your blood pressure, heart, or asthma you may take this with a small sip of water the morning of your surgery. If you take diabetes medicines and/or insulin, talk with your doctor about whether you should take them.
• Please remove nail polish.
• Please remove all jewelry including body piercings.
• Do not wear makeup.
• If you are taking any medicine for your blood pressure, heart, or asthma you may take this with a small sip of water the morning of your surgery. If you take diabetes medicines and/or insulin, talk with your doctor about whether you should take them.

What will happen the day of surgery?

• If you are checking in on the day of your surgery, after you have been to the Admitting Office you will be taken to a room. This may not be the room where you will be taken after surgery.
• You will be given a hospital gown and asked to remove all of your clothes including underwear and socks. Put on the gown opening in the back.
• You will also be asked to remove all dentures, partial plates, prosthesis, hairpieces, jewelry (including body piercings), contact lenses, and glasses.
• You will be asked questions about your medical history. Many of these questions you will have been asked before. Please know that these need to be asked so that we can give you the best possible care.
• Depending on the time of your surgery, you may go to the Pre-Anesthesia Area (PAU). If you go to the PAU, you will be there for one to one and a half hours before your surgery.
• Your nurse will tell your family where to wait.
• You will have an IV (needle in your arm for fluids) started and you will be given any medicine that you need. You will also be given medicine that will help you to relax.
• You will have an area on your abdomen shaved and washed.
• Someone from anesthesia (the person who puts you to sleep) will talk to you.
• When it is time for your surgery, you will be taken to an operating room. The room will be cold and you will be given a warm blanket.
• The operating room staff will include your doctor and his assistant, an anesthetist (the person who will put you to sleep), a circulating nurse, and a scrub nurse. These people are there to take care of you and no one else.

• You will have sticky pads placed on your chest so that the staff can watch your heart. A blood pressure cuff will be placed on your arm so that your blood pressure can be checked. A device called a pulse oximeter will be put on your finger. It will tell us how much oxygen is in your blood.

• The anesthetist will put a soft mask over your face. This will give you plenty of oxygen. You will then be given medicine in your IV that will relax you until you go to sleep. The anesthetist will give you medicine so that you will not feel anything and you will not wake up during the surgery.

• The nurse will call your family and tell them how you are doing. They will call them about once an hour while you are in the operating room.

• You will have a catheter (tube in your bladder) put in. You will still have this when you wake up.

• At the end of your operation, you will be given medicine that will help you to wake up. You will be taken to the Recovery Room for about an hour to an hour and a half. The doctor will call and talk to your family.

• When you wake up, you will have an oxygen mask on your face, a blood pressure cuff on your arm, and a device on your finger to check your oxygen.

• When you are awake, you will be taken to your room.

• You will have a nurse who will check on you very closely.

• Do not try to get out of bed. Your nurse will tell you when you can get up and will help you the first few times. **Do not try to get up without help.**

• There will be medicine for you if you are having pain or are sick at your stomach. Tell your nurse if you need this.

**What will happen when I get home?**

• Your doctor will give you guidelines to follow. Be sure to follow his or her instructions.

• You should avoid all strenuous activity for the first few weeks after your surgery. Ask your doctor how active you can be. Your doctor will tell you when you can lift, drive, and return to your normal activity.

• You may be told to be on a special diet after your surgery. Your doctor will talk with you about this.

• Keep your dressing clean and dry.

• Be sure to keep your follow-up appointment with your doctor.

**Call your doctor if you:**

• Have a bloated or swollen abdomen.

• Have nausea or vomiting.

• Have a fever above 100.5° twice.

• Become short of breath or have chest pain.

• Have any redness, drainage, swelling, or bleeding from your incision.

• Have any other questions or concerns.

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