

#### Driving

You should not drive for 4-6 weeks following your surgery. Please contact your insurance company and ensure that you are free from the sedative effects of analgesia, pain free, and able to perform an emergency stop in a safe place before resuming driving. If after checking with your insurance you are still in doubt, please check with your GP.

The information in this booklet is generalised for all surgical patients.

If you have had a hernia repair, please speak to your physiotherapist or surgeon.

If you have any concerns regarding your progress or urgent questions, please speak to the physiotherapist on your ward.

#### **Occupational Therapy (OT)**

If you have any concerns about how you are going to manage at home, please ask to speak to the OT within our team.

#### Further sources of information

NHS Choices: <u>www.nhs.uk/conditions</u> Our website: <u>www.sfh-tr.nhs.uk</u>

#### Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

#### King's Mill Hospital: 01623 672222 Newark Hospital: 01636 685692 Email: <u>sfh-tr.PET@nhs.net</u>

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email <u>sfn-</u> <u>tr.PET@nhs.net</u>. This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references for this leaflet, please email <u>sfh-tr.patientinformation@nhs.net</u> or telephone 01623 622515, extension 6927.

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### **INFORMATION FOR PATIENTS**

# Therapy Services

Physiotherapy following your abdominal operation

> Healthier Communities, Outstanding Care

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## Aim of this leaflet

The aim of this leaflet is to provide you with information and advice that will help to optimise your recovery. It is intended for patients who have had abdominal surgery. The booklet includes information regarding breathing exercises, mobility and returning to normal day to day life.

If you normally suffer from breathing problems, or if you have had an operation that involved a large incision (cut), they you may be seen by a physiotherapist.

## Helping your lungs recover

The general anaesthetic you have had can affect your lungs and, together with the pain from your wound, can make it difficult to take a deep breath and have a cough. This means that phlegm (thick mucus) can collect in your lungs putting you at risk of developing a chest infection.

Deep breathing, coughing, and mobilising (walking) after surgery can help prevent complications such as chest infections.

If you are in pain, use your pain relief button (if you have one). If not ask your nurse for some more pain relief. It is vitally important that you are comfortable enough to breathe deeply, cough, and mobilise. Doing all 3 of these things as early as possible will help optimise your recovery.

## **Breathing exercises**

Do the following deep breathing exercises while sitting as upright as possible in bed, or preferably in a chair:

- 1. Relax your shoulders and upper chest.
- 2. Take a slow, deep breath in (through your nose, if possible), to fill your lungs as fully as you can.
- 3. Hold this breath for 3 seconds.
- 4. Breathe out slowly through your mouth.

Take 5 of these deep breaths, then rest – doing more than this may make you feel light- headed. Practice this frequently, 3-4 times an hour when you are awake.

## Supported coughing

Coughing is the normal way to clear phlegm from your lungs. You will need to do this more often in the first few days of your operation. Coughing will not damage your stitches or staples.

To help you cough, support your wound firmly with a towel or pillow – this will ease any discomfort from your wound. You may also want to loosen any phlegm by doing a 'huff' prior to coughing; this is a forced breath out through your open mouth, as if steaming up a mirror.



# Walking (mobilising)

The best activity for your lungs is to get back up on your feet as soon as possible; this may even be the same day after your operation. Gentle activity will help your gut start working again and help with your circulation. The nursing staff and physiotherapists will help you until you can walk safely by yourself; after this you will be responsible for walking regularly and increasing your distance. You will not routinely be taken to the stairs, unless you have any particular concerns with your stairs at home.

Benefits of walking:

- Prevent chest infections.
- Reduce risk of developing blood clots.
- Promote independence.
- Improve strength, fitness and endurance.

# Sitting out of bed

You should aim to sit out of bed the same day as your operation. Stay sat out for as long as manageable, and progressively increase this time.

## Going home

For the first 1-2 weeks you will tire easy, so get plenty of rest. However, staying in bed is not advised. You should aim to slowly build up your stamina and walking distance day by day. By week 4 you should be able to perform light chores, meal preparation, and walk comfortably for around 30 minutes. By weeks 6-12 you should be completing your usual activities. Please discuss any concerns regarding strenuous work or sport with your doctor.