

# Preparing and Recovering from Your Robotic Kidney Surgery

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It is normal to have questions about your surgery. This handout gives you information about what will happen to you before, during and after your surgery. If you still have questions, ask your nurse or doctor for more information.

## Before Surgery

- You will get instructions about the time you need to arrive at the hospital.
- Make sure you have an adult to take you home after surgery or your hospital stay.
- You may need to have some tests done before your surgery (blood tests, X-rays or other tests your doctor may feel are needed).
- You may have an appointment to see an internal medicine doctor for a history and physical before your surgery. This may be referred to as OPAC (OSU Preoperative Assessment Center).
- You will need to wash with a special soap called chlorhexidine gluconate (CHG), also known by the brand name Hibiclens. You will wash with this the night before surgery and the morning of surgery.
- **Do not** eat or drink after midnight the night before your surgery.

## Important Medicine Information

Talk to your doctor about any medicines you take to thin your blood, prevent clots or manage your diabetes. These medicines may need to be adjusted before surgery. Call your nurse or doctor if you have any questions.

**If you have a stent, do not stop taking your medicines to prevent clots without first talking to the doctor who put in the stent.** For more information, ask a member of your health care team for the patient education handout on protecting your stent.

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**This handout is for informational purposes only. Talk with your doctor or health care team if you have any questions about your care.**

If you take aspirin or medicines like aspirin for arthritis pain, your doctor may have you take a different medicine in the weeks before your surgery or procedure.

If your surgery or procedure is canceled for any reason, call your doctor because you may need to restart the medicines you take.

## Day of Surgery

- Before your surgery, a nurse will ask you questions about your health and your surgery. These questions may be asked in the pre-operative care areas several times by different team members.
- You will be asked to not wear or remove these items the day of surgery:
  - ▶ Nail polish
  - ▶ Make-up
  - ▶ Jewelry
  - ▶ Hair clips
  - ▶ Dentures or partial plates
  - ▶ Contact lenses or eyeglasses
  - ▶ Hearing aids
- You may have 1-2 family members visit you while in the pre-operative area.
- The nurse will answer any questions you or your family may have and tell them where to wait while you are in surgery.
- You will meet your anesthesia team before surgery.
- You will receive an intravenous (IV) catheter in the pre-operative area.

## During Your Surgery

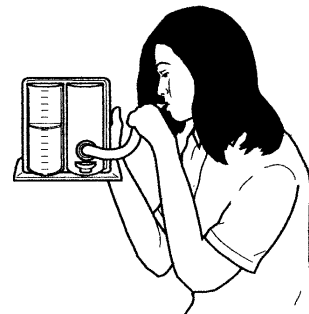
- Surgery may take up to 3-5 hours. Your doctor will tell you how long your surgery may take.
- If your surgery takes longer than you were told, it does not mean that anything is wrong. Your family will be updated on how you are doing. After your surgery is over, the surgeon or an assistant will call or come to the waiting area to talk with your family in a private room.
- Your family members will be able to leave the surgery waiting area while you are in surgery.

- Your vital signs (blood pressure, temperature, pulse and breathing rate) will be watched closely.
- You will be positioned on the operating room table after you are asleep.
- You will have a bladder tube called a foley catheter placed. This is a flexible tube that is put into your bladder to drain your urine. This is normally removed the following morning.

## After Surgery

Once your surgery is done, you will go to the Post Anesthesia Care Unit (PACU) for about 1 to 2 hours to recover before going to the room. The following is what to expect when you wake up after your surgery:

- Your pulse and the amount of oxygen in your blood will be checked. You may be given oxygen through a small tube inside your nose.
- You may feel cold. This is normal after general anesthesia.
- Tell your nurse if you have pain, and medicine will be given to you, to help make you more comfortable.
- You will be taught to use a breathing exerciser (incentive spirometer) to help keep your lungs clear after surgery.
- You will have an IV in your arm until you are able to drink fluids. You will start by sipping liquids and will quickly be back to your normal diet.
- Your nurse will help you get out of bed after your surgery. Walking also helps decrease gas pains.
- If you have a special surgery called a nephroureterectomy, you will keep the foley catheter for 5 days.
- You will wear special sleeves on your legs called **Sequential Compression Devices (SCDs)**. These will be placed on your legs to help prevent blood clots.
- Most patients are discharged the following day after surgery as long as you are meeting your milestones for walking, eating and pain management.



## Incision Care

- The small incisions made during surgery are called port sites. These sites will have special “glue” holding them together. The glue will wear off in 3 to 4 weeks.
- There are no staples or stitches to be taken out. You may have a small amount of drainage from your incisions. You may also have bruising around the incision area 1 to 5 days after surgery. This will go away over time.
- Keep the incision clean and dry.
- You can shower 1 day after your surgery, but **do not** take tub baths, use hot tubs or swimming pools until your incision has healed. It usually takes about 2 weeks for the incision to heal.
- Wash your incision gently with soap and water. Rinse well with clean water and pat dry with a clean towel.

## Pain Management After Surgery

- Pain medicine will be prescribed for you. Take pain medicine as directed to help relieve your pain.
- You may be asked to take Tylenol (acetaminophen), every 6 to 8 hours. You may also be prescribed a narcotic pain medicine, such as oxycodone.
- Pain medicine can cause constipation. Take a stool softener pill, 2 times a day to help reduce this problem.
- Some pain medicines such as Percocet or Vicodin have Tylenol in them. **Do not take more than 2000mg of Tylenol (acetaminophen) per day.**

## Care at Home

You will be given instructions on how to care for yourself at home. Get plenty of rest and do not overdo it. A good rule to follow is if you do not feel up to it, do not do it. Here are some guidelines for you to follow when you go home.

- Your nurse or doctor will tell you when it is okay to drive. This is usually when you are able to comfortably wear a seatbelt, and press the gas/brake pedals. You may not drive while taking narcotic pain medicines.

- No heavy lifting (nothing over 5 to 10 pounds).
- No strenuous activities or exercises.
- Take the stairs slowly. Go one step at a time.

You may tire more quickly than before your surgery. Try to increase your activity level a little more each day. Go for short walks. Start with short distances and gradually increase your speed and distance.

## **Discharge from the Hospital**

- During your hospital stay, you will meet a Patient Care Resource Manager (PCRM). The PCRM will work with the other members of your health care team to help arrange for any care you may need when you leave the hospital.

## **Call your doctor if you have any of the following:**

- Redness, swelling or skin separation at the incisions
- Pus from the incision
- Fever of 100.4 degrees Fahrenheit (38 degrees Celsius) or higher
- Problems urinating or with bowel movements
- Nausea or vomiting