

Information on **Post Abdominal Surgery's Common Complications**

Preoperative preparation

- 1. Admit 1 day before or on same day as scheduled elective operation.
- 2. Anaesthetic assessment, *Inform your doctors / Nurses* about allergy history (drug / food), regular medications or other medical conditions.
- 3. Keep fast (water & food) for 6 to 8 hours before operation (Except for Local Anesthesia).
- 4. Change operation clothes & empty bladder 30mins 1hour before transferring to operating room.
- 5. Pre-medication, prophylatic antibiotic and intravenous line may be required.

Postoperative Instruction

A. General

- 1. For General Anaesthesia: Mild throat discomfort or pain due to intubation. Nausea or vomiting are common; inform nurses if symptoms severe.
- 2. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe or more analgesics are required.
- 3. Can mobilize and get out of bed 6 hours after operation, inform if need for help.

- B. Wound care 1. Keep wound dressing dry.
 - 2. Stitches or skin clips will be taken off around 7-14 days after operation (if present).
 - 3. Drainage will be removed by doctor according to patient's condition (if present).

C. Diet

Nurse will inform you when you can resume diet (Fluid / Congee / Soft / Ordinary diet) after anaesthesia.

Common Risks and Complications (not all possible complications are listed)

A. Anesthesia related

- 1. Toxicity of local anaesthetic injected around the site of operation may result in severe but rare complications.
- 2. Allergic reaction and shock.
- 3. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism (General
- 4. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease (General Anaesthesia).

B. Procedure related

- 1. Wound pain / Oedema / Congestion / Bruising of wound
- 2. Wound infection / Abscess formation
- 3. Bleeding (may require re-operation to evacuate the blood clot)
- 4. Collection of blood / Haematoma
- 5. Collection of fluid / Seroma
- 6. Hypertrophic scar and keloid formation (may result in unsightly scar)
- 7. Wound break down
- 8. The index lesion (may be incompletely excised / cannot be accurately localized) / Recurrence

C. Abdominal Surgery related

- 1. Inability to perform the target procedure
- 2. Possibility of opening a colostomy (esp. low rectal tumour or advanced tumour)
- 3. Bowel adhesion, internal hernia
- 4. Prolonged ileus
- 5. Anastomosis complication (e.g. leakage / fistula / stricture)
- 6. Other visceral injury (e.g. bile duct / ureter / spleen)

Things to take note after discharge

- 1. Contact your doctor or inform Ward (Tel: 2/F: 2760 3451, 4/F: 2760 3406) if severe wound pain / discharge / swelling / redness is noted.
- 2. Take analgesics prescribed by your doctor if required.
- 3. Resume daily activity gradually (according to individual situation).
- 4. Attend Doctor's clinic as scheduled for follow up / removal of stitches / Clips / drainage (if applicable).

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

