

# Your Whipple Surgery

## What to Expect



This booklet includes information about your upcoming Whipple surgery.

## Before Your Surgery

- Information will also be sent to you by mail from the booking office. This packet will include more information such as when to arrive, where to park, and where to go once you arrive at the hospital on the day of your surgery.
- The Pre-Admission Unit will contact you to discuss your surgery in person or over the phone and answer any questions that you may have. This will also include reviewing any medicines you are currently taking and whether you need to stop taking any of them before your surgery.
- Talk to your insurance company about your coverage. Tell your Nurse Navigator if you do not have insurance.

Please contact the Preadmissions Unit at 207-662-8217 if you have any questions.

### On the day of surgery

- Please shower with an antibacterial soap such as Dial<sup>®</sup> the morning of or night before surgery. This will help to reduce the risk of infection.
- Wear clean, comfortable, loose-fitting clothing such as a t-shirt and pants that you can also wear home the day you leave the hospital.
- Bring a **list** of current medicines you are taking and the day and time you last took them. This includes prescriptions, supplements, and over the counter medicines. **Do not** bring medicines with you. We will provide you with all the medicines you need while you are in the hospital.

### While you are in surgery

- Your family may wait for you in the Surgical waiting room (ASU) while you are in surgery.
- Please choose one person to be your **spokesperson**. Your spokesperson will receive information and updates from the surgeon to pass along to other family members and friends.
- A hospital representative will be available in the waiting area to answer questions your family may have, let them know when they are able to see you, and inform them of when you will be transferred to your hospital room.

## Pain Control after Surgery

The Anesthesia Pain Team will work with you and your surgeon to plan the best method of pain relief for you. Taking care of your pain after surgery is an important part of healing.

Your anesthesiologist will give you medicine to help manage your pain after surgery.



- You will be given pain medicine through a small catheter in your back. This is called an epidural catheter. An anesthesiologist will visit you every day until your epidural catheter is removed.
- Pain medicine will be given by intravenous or IV. You will be able to control the amount of medicine you get by pressing a button to help you stay more comfortable.

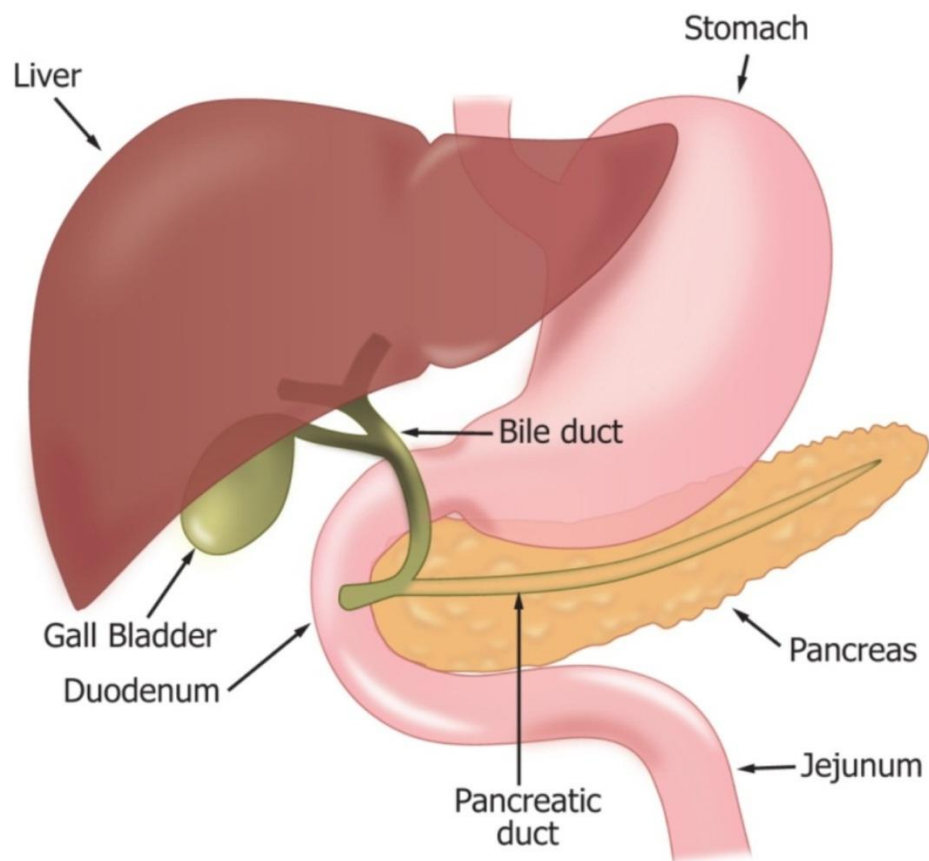
More details about these types of pain control methods will be discussed in much more detail during your anesthesia visit before your date of surgery. This visit will occur either over the phone or in person.

**During your hospital stay, please let your nurse know if the pain medicine is not working.**

## About Whipple Surgery

Whipple surgery is a type of surgery that is done for many reasons:

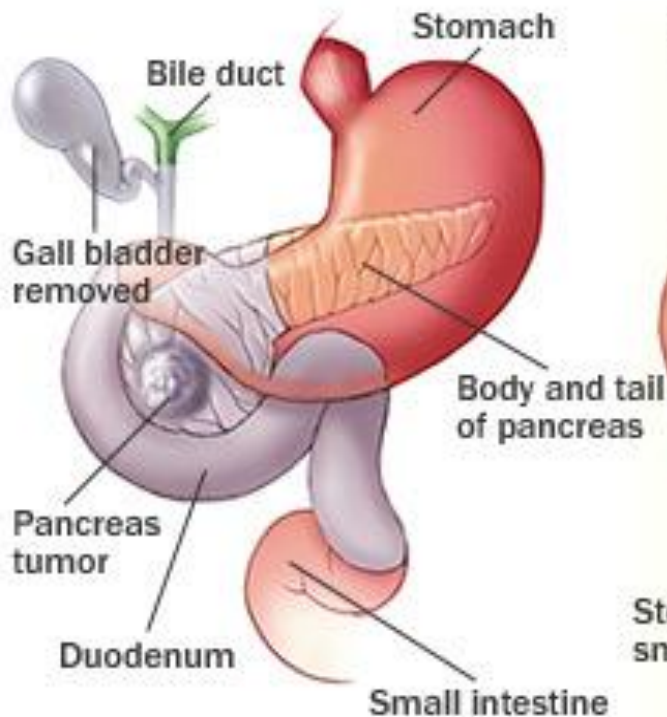
- Cancer in the pancreas (pan·cre·as)
- Pre-cancerous tissue in the pancreas
- Cancer in bile ducts
- Cancerous or non-cancerous tumors or weak spots in an area of the small intestines called the duodenum.
- Chronic pancreatitis



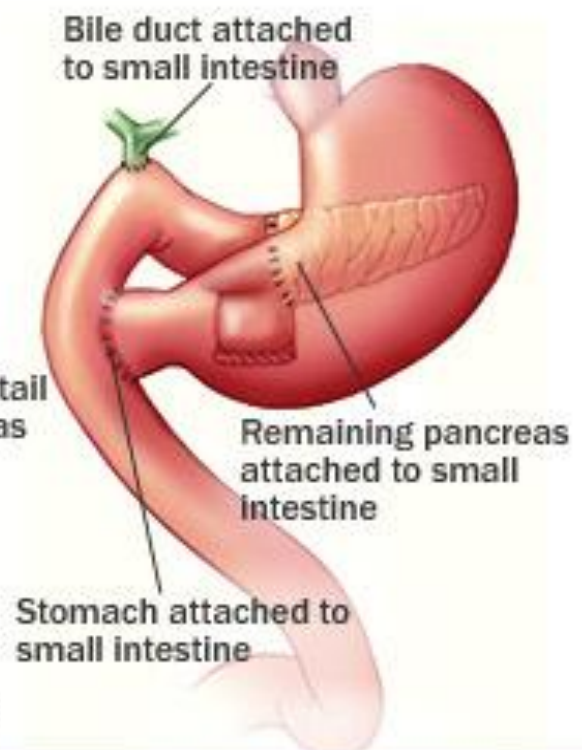
## During your Surgery

- You will be given general anesthesia. This is a medicine that puts you into a deep sleep during the surgery. You will not see or feel anything during the surgery.
- Your surgeon will take out the affected tissue. If you still have your gallbladder, your surgeon will also remove it.
- Three areas will be sewn back together: the pancreas to the small intestines, the bile duct to the small intestines, and the stomach to the small intestines.
- You will have a drain at each of these sites. These drains will stay in place when you leave the hospital. We will remove them at your follow-up office visits.
- You will also have a PEG tube placed at the time of your surgery. This tube will drain your stomach and provide nutrition until you are able to eat on your own. We will also remove this tube at one of your follow-up visits.
- When you wake up from surgery you will also have a tube in your nose. This tube will empty air and fluid from your stomach. The surgical team will remove this after a couple of days.

**Before surgery**



**After surgery**



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## After Surgery

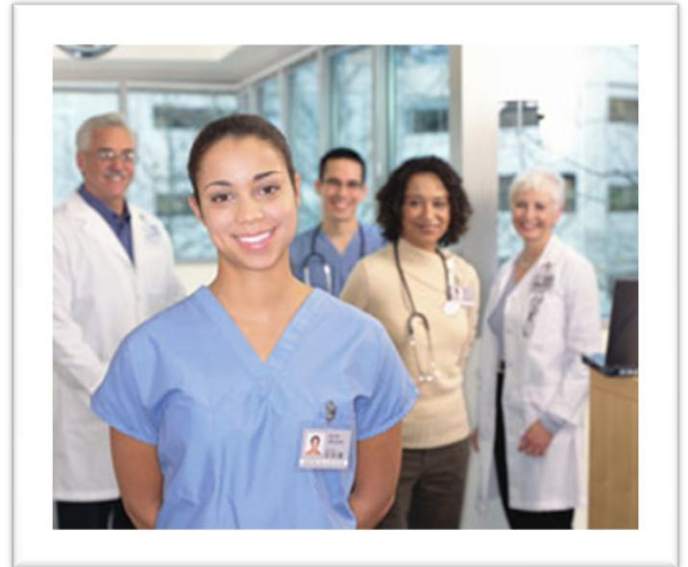
After your surgery you will be brought to **the Post-Anesthesia Care Unit (PACU)**. PACU is sometimes called the recovery room. You will stay on this unit for at least 4 hours.

### **Can I have visitors in the PACU?**

Yes. After your surgery, your nurse will make sure that your pain is under control. This may take an hour or more. Your nurse will let your family and friends see you for a short visit.

To help all patients heal, visitors are limited in PACU.

- 2 adults may visit at a time.
- Children are asked **not** to visit patients in PACU.
- Visits are limited to 5 minutes at a time.

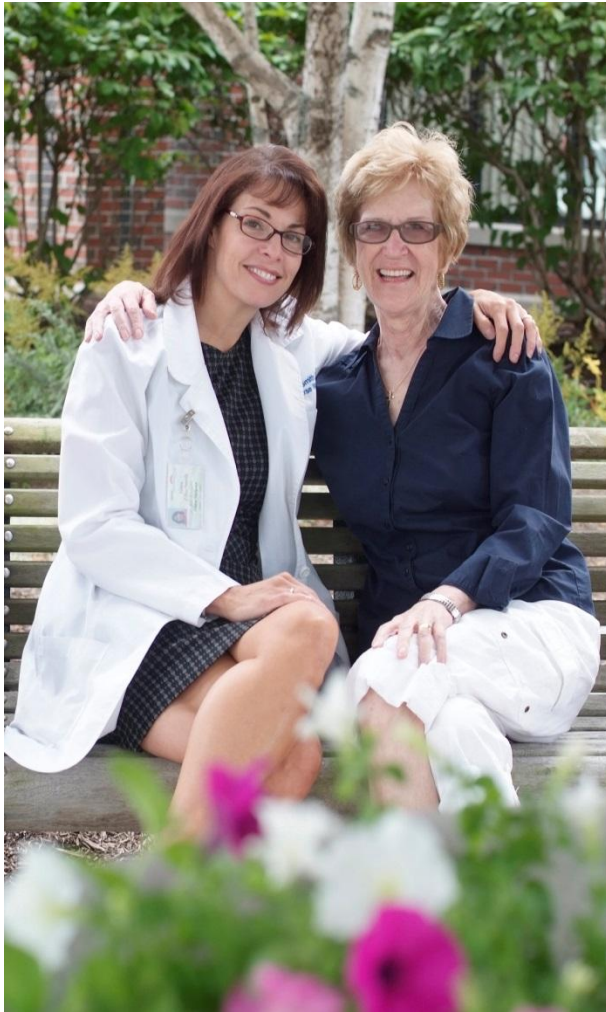


### **Moving to Richards 3<sup>rd</sup> Floor**

After your stay in PACU, we will move you to a private **Close Observation Room** on the 3rd floor of the **Richards Building (R3 COR)**. You will stay on this unit until you are well enough to move to a two-bed room in the **main unit** of R3. You will share this room with one other person. The same nurses who cared for you on R3 COR will care for you here.

During this time, your nurse will teach you how to take care of yourself and your drains and tubes when you are at home. Your nurse will keep a close eye on you and will check your vital signs often. Vital signs include your breathing, heart rate, blood pressure, and temperature.





### **Can I have visitors while I am in the hospital?**

Visitors can come at any time. It is important that patients get a lot of rest. There is a quiet time between 8:00 pm and 6:00 am. During this time:

- Please speak quietly
- Please turn cell phones to vibrate
- Lights in the hall will be dimmed

### **Letting your family and friends know how you are doing**

- Please pick 1 person to act as a **spokesperson** while you are in the hospital. This person can get information about how you are doing and then pass it along to others.

- Your spokesperson can call for updates any time except between 7:00 - 8:00 am and 7:00 - 8:00 pm. Your nurses use this time to share information about you care with the next shift of nurses.

### **What if my cancer cannot be removed?**

If we find out during your surgery that all of the cancer tumor cannot be removed, we will move you to the **Gibson Pavilion** to recover from your surgery. The Gibson Pavilion is an inpatient unit at Maine Medical Center that focuses only on taking care of patients with cancer. You will still be seen by your surgical team every day until you leave the hospital.

## Your surgical team

Many people will care for you during your hospital stay. Maine Medical Center is a teaching hospital and your surgeon wants to help educate future doctors.

- Resident Surgeons - These are doctors who are completing advanced training in surgery and are part of your surgical team. They will participate in assisting your surgeon with your surgery and caring for you afterwards in the hospital.
- Nurse Practitioner (NP) or Physician Assistant (PA)- These are healthcare professionals with advanced training. They work closely with your surgeons. They are a great resource and can answer any questions that you may have during your recovery.



- Medical students- These are students interested in the medical field and are completing some of their training in surgery.

Your surgical team will see you at least two times every day during your hospital stay. During these visits they will:

- Watch your progress closely
- Discuss your plan of care each day
- Talk to you about what you can do each day to help you recover and be ready for discharge.

If you have questions or concerns, you can speak with any one of them. We suggest that you write down your

questions as you think of them so that you can get all of your questions answered.



## Nutrition after Surgery

You may not be eating your normal diet when you leave the hospital. This happens to some people. A dietician will work with you and your surgical team to create a nutrition plan during your hospital stay and for at home. They will make sure you are getting the best nutrition possible.

Here are some of the items the dietician will help you and your surgical team with:

- Giving nutrition through your feeding tube or IV
- Slowly adding the right kinds of foods back into your diet
- Teaching you about healthy eating after you go home including a low fat diet
- Supplements in your diet such as Carnation Instant Breakfast<sup>®</sup>, Ensure<sup>®</sup>, and Boost<sup>®</sup> can help you get more protein without having to eat a lot of food. We recommend these supplements until your appetite improves and you are able to eat food on a regular schedule. This will help you heal faster. You can buy these at most stores that sell food such as Wal-Mart, Hannaford, or Rite Aid. Generic brand is OK. Please refer to separate handout.



## Rehabilitation Medicine

The Rehabilitation Medicine Department will meet with you the first day after your surgery. They will help you get back to a level of activity that will allow you to safely return to your home or to rehab for a short time.

- Physical therapists will help you build back your physical strength. They may also show you how to use special equipment such as walkers to help you get around easier.
- Occupational therapists will help you get back the skills you need to take care of yourself, such as getting dressed and bathing. These skills are sometimes called activities of daily living or ADL.



## Planning for leaving the hospital

A Hospital Care Manager will work with you and your family to plan for your care after you are discharged. Talk with your Hospital Care Manager if you are worried about special needs you may have.

It is important that you plan for your ride home from the hospital in advance. Tell your nurse if you need help finding a ride.

The Hospital Care Manager can help with planning for a short stay at an inpatient rehabilitation center before you go home, if needed.

The Hospital Care Manager can arrange for a visiting nurse to come to your house and help with:

- Taking care of your drains
- Making sure that your wound is healing
- Changing your bandage
- Giving you special medicines, if needed

The Hospital Care Manager can also arrange for services from an infusion company to meet with you in the hospital to talk about enteral feeding through your PEG tube. Often times they will have a team that will follow your nutrition needs after you go home. You can call the infusion company if you have any questions about using your feeding pump.

### **Your follow-up visit**

You will have your first follow-up visit in your surgeon's office about 1 week after you leave the hospital. We will arrange your follow up appointments at an office location that is closest to you. Most times we can schedule this appointment for you before you leave the hospital. We will include your Primary Care Provider and your Medical Oncologist (if appropriate) with updates regarding your progress.

We are committed to providing you with the best care possible. If you have any questions, please feel free to call your Nurse Navigator at 207-662-1951.