Texas Cardiothoracic Surgery Associates, P. A. www.texascardiothoracicsurgery.com

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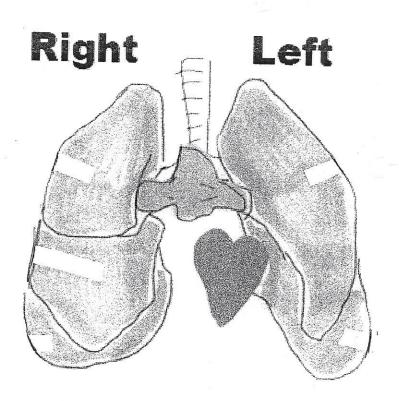
Telephone No: (214) 942-5222

John L. Jay, M. D.

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	Discharge Instructions for Lung Surgery Patients
Name: _	
Date of D	Discharge:
Date of C	peration:
	n:
•	
Follow-up	Instructions:
1.	Call our office at (214)942-5222 as soon as possible to make an appointment for a follow-up visit in
	weeks. You may choose to be seen at the office location which is most convenient for you. Our office will give
	you instructions for having a chest x-ray made prior to your visit.
`2.	Call your pulmonologist, Dr, for an appointment in 1-2 weeks.
3.	Call your primary physician, Dr, for an appointment in 2-3 weeks.
4.	Call you oncologist, Dr, for an appointment in 2-3 weeks.
5.	Bring these discharge instructions to all of your follow-up appointments.
Discharge	Medications:
1.	Norco: 1-2 tablets every 4-6 hours as needed for pain. You may substitute Tylenol plain or extra strength, 1-2
	tablets every 4-6 hours if it is adequate for your pain control.
2.	
3.	

Other Medication Instructions:

Date of Operation:	Surgeon:	Pulmonologist/Oncologist: .		
Operation:				



General Instructions:

- 1. Please follow-up with your pulmonologist, oncologist, and your primary care physician, as listed on page 1. Please <u>bring this sheet</u> with you whenever you visit any of your other doctors.
- 2. The medications you were given upon discharge may change in the future. Some medications are intended to be taken for only one month or less after discharge. Others may be eliminated or replaced by different drugs as your needs change. Your pulmonologist/oncologist and your primary care physician will instruct you in regard to your medications when you return to them for follow-up.
- 3. If you have problems or questions about your surgery, please call our office at (214) 942-5222.

Activity Instructions

- 1. Continue the program of <u>walking</u> that you began in the hospital. You should set a goal for yourself such as walking up to one-half mile per day by the end of your second week home from the hospital. This distance may be divided between 2 or 3 separate trips within the day or may be done all at once depending upon your schedule and stamina level.
- 2. Avoid walking in inclement weather, particularly in either extremely hot or cold weather. You may choose to walk in one of the malls or on a course that you have laid out inside of your house instead of walking outside.
- 3. You may use a <u>treadmill</u> if you have one. Set the treadmill at the lowest speed (usually 1.5-mph) and at the lowest incline, if that is adjustable. Begin walking for 5 minutes at a time and then increase the length of time that you walk on the treadmill rather than increasing speed. Once you can walk for 20 30 minutes comfortably, you may begin to increase the speed. These treadmill instructions refer only to your home use, and may not be the same that you will use while in the supervised and monitored Cardiac Rehab. You may also use an exercise bicycle if you have one, once you are walking well.
- 4. Avoid <u>lifting</u> more than 5-10 pounds for two weeks. When lifting use your legs and not your back to carry the load. When pushing or pulling open heavy doors, keep your arms close to your body rather than outstretched.
- 5. Avoid any activity that will place a great deal of stress across your chest for 2 months from the time of your surgery. Examples include a full golf swing, swinging a baseball bat, or lifting weights.
- **6.** You may begin to <u>drive</u> short distances in 2 weeks unless otherwise instructed by your doctor. Do not drive while taking pain medication other than Tylenol, or until you feel strong enough.
- 7. You may <u>shower or bathe</u> as you wish and are encouraged to do so daily. Wash your incisions gently with soap and water unless you have been instructed otherwise by your doctor.
- 8. Use your incentive spirometer at home four times per day. Aim to reach 1500 or higher.
- 9. Remember that a regular exercise program is one of the keys to good health and maintaining cardiovascular fitness!
- 10. Most importantly, <u>Do Not Smoke!</u> Ever.

Care of the Incisions

- Wash your incisions gently with soap and water when you bathe unless otherwise instructed by your doctor then pat them dry. Unless drainage or wound edge separation occurs, there is no need to keep your incisions covered.
- 2. Do not use lotions or creams on your incisions. Do not use Betadyne or any antibiotic ointment or cream (such as Neosporin) on your incisions even if you think that they are becoming infected. These products will macerate the skin and slow the healing process. Call your surgeon if any of your incisions become reddened, warm to the touch, swollen, or develops drainage of thick fluid.
- 3. It is NOT unusual to have small amounts of clear, yellow, watery <u>drainage</u> from the incisions, particularly of the small incisions where the drainage tubes were placed. This type of drainage is not a sign of infection. It is also not unusual to have some separation of the wound edges. If clear drainage or wound edge separation occurs, begin twice daily cleansing of these areas with <u>hydrogen peroxide</u> and keep them covered with a clean dressing.
- 4. It is not unusual to feel a <u>burning sensation or pain under the breast</u> on the same side as your incision. This occurs when the intercostal nerves becomes irritated by the healing process. This usually subsides over several weeks as you continue to recover.

Diet Instruction

- 1. It is common to have a poor appetite for the first few weeks after major surgery, or to feel that foods just don't "taste right". This will improve as you continue to recover.
- 2. Weight is a good measure of both diet. Excess weight adds workload to your heart and lungs, even while you are resting, and every effort should be made to shed and keep off those extra pounds.
- 3. Alcoholic beverages should be avoided for at least the first few weeks after chest surgery and until you are no longer requiring pain medication and then used only in moderation.
- 4. <u>Constipation</u> is common following chest surgery due to decreased activity, stress, medications, and changes in your diet and eating habits. You may use milk of magnesia or glycerin suppositories as needed to remain regular.