

Carotid Endarterectomy

Patient Information Booklet

This leaflet will help you to understand your procedure and how you can play an active part in your recovery using the enhanced recovery pathway. It is important that you, your family or friends can take an active role in helping you get better.

What is enhanced recovery?

Research has shown that patients can recover from their surgery quicker than previously thought. This is due to improvements in medication, surgical and anaesthetic techniques. This can mean a shorter stay in hospital and potentially, a reduction in the risk of post-operative complications.

Before your admission

You may be asked to attend the Pre-Operative Assessment Clinic a week or so before the operation. You will be seen by a senior nurse, a doctor, and if necessary, an anaesthetist or other health care professionals.

This visit usually takes about 2-3 hours and will give you an opportunity to ask any questions you may have regarding your illness or your admission to hospital. The Enhanced Recovery Programme will be explained in more detail to you.

At this clinic you will:

- Be asked to give details of past illnesses and operations and answer questions about your health.
- Be asked to give a list of regular medication you take at home and any allergies you may have. This is important as you may be asked to stop taking some medications before having your operation.
- Have some tests such as blood sampling, ECG (heart tracing) or a chest x-ray.
- Be assessed to help us decide what medication and aids are needed on your admission. These may include compression stockings to help to reduce the risk of blood clots.
- Be able to talk about your home arrangements so that together we can help plan your discharge home after the operation.
- Be offered health promotion advice about smoking or alcohol intake, if appropriate.

Before your operation

At the pre-op clinic, you will be given special carbohydrate drinks to take home and drink the night prior to your surgery and the morning of your surgery. We will tell you what time to take these drinks.

The day of your operation

Usually, you will be admitted on the same day that your surgery takes place.

The day of your surgery

An anaesthetist will visit you before your operation and ask you some questions about your health. They will discuss your anaesthetic for your operation and how your pain will be controlled afterwards.

When you are satisfied that you understand the risks and benefits of your surgery, the consultant will ask you to sign a form giving us your consent to go ahead with

surgery.

If you wear dentures, you will need to remove them before your operation. A nurse will complete a pre-operative safety checklist with you on the ward and this will be checked again when you arrive in theatre.

After your operation

Following your operation you will spend a short time in recovery before being taken to the ward where you will stay overnight.

You will be given personalised daily goals, which will be detailed in your Patient Diary. We encourage you to complete these to enhance your recovery.

Pain Control

It is important that your pain is well controlled after your operation so that you can breathe deeply, walk about and eat and drink comfortably. You will be prescribed pain relief that nursing staff will give you at regular intervals. It is important to inform the nursing staff if you feel that your pain is not well controlled. Do not wait until the pain is severe. There is also a dedicated ward pharmacist available for advice and counselling should you need to ask any questions about side-effects and management.

Mobilising

Mobility plays a vital role in your recovery process. We will encourage you to minimise the amount of time you spend in bed. This is part of Enhanced Recovery and enables you to make the quickest, safest recovery. The nursing staff will help you sit out of bed after your operation. You may also be seen by a physiotherapist. Being out of bed and in an upright position and walking regularly will help improve lung function and reduce the risk of a chest infection and blood clots.

Sickness

You may feel sick after your operation. It is important that you inform nursing staff if you feel sick so that they can give you medication to help calm your stomach and prevent vomiting.

Drain

During your surgery a drain will be put into your neck. This will be removed the following morning before you are discharged.

Cannulas

You will have cannulas in your arm that enables us to give you fluid and medication. This will be removed as soon as possible following your operation.

What complications might I have?

Complications do sometimes occur but are rapidly recognised and dealt with by nursing and medical staff.

- Chest Infections- Chest infections occasionally occur as they are a risk with any surgery and are particularly common in smokers. The treatment is antibiotics and physiotherapy. Remember to do the deep breathing exercises

regularly as they are very important in preventing complications.

- Blood Clots/Deep Vein Thrombosis (DVT) -When you are inactive for a period of time, blood moves more slowly around your body which can trigger a blood clot. We will assess your risk factors and you may be asked to wear compression stockings and have an injection daily.
- Wound Infections- Wounds sometimes become infected and this may need treatment with antibiotics. Severe infections are rare.

If you think that all is not well do not hesitate to ask the nurses or doctors.

When you leave hospital

You will be able to go home as soon as the team of health professionals looking after you think you are able. Most people will make a full recovery and can return to normal activities.

On discharge, you will be asked to complete a questionnaire about the Enhanced Recovery Programme. Please fill this in. Your comments are very important to us as they help us to improve.

Returning to normal activities

The healthcare team will tell you when you can return to normal activities. Regular exercise should help you. Before you start exercising ask the healthcare team or your GP for advice.

Do not drive until you are confident about controlling a vehicle and doing an emergency stop safely. Always check with your doctor and insurance policy.

Long Term Treatment

Your consultant may recommend that you have long term treatment with blood thinning medication, such as aspirin or clopidogrel to reduce the risk of the artery becoming narrowed again.

Advice and Support

In the unlikely event that you experience any problems following discharge please contact the ward for advice.

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