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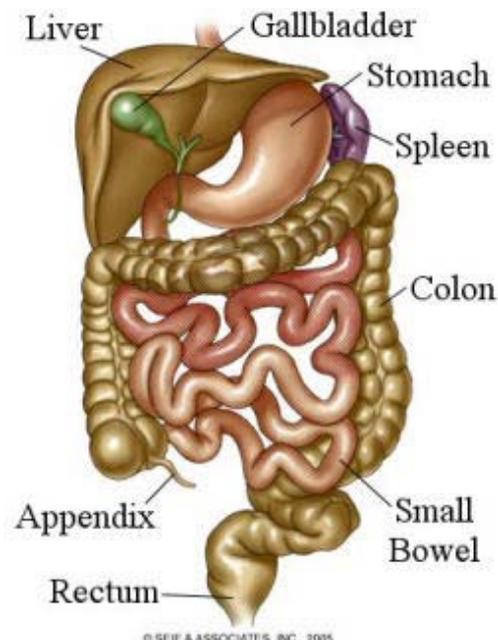
Patient Name:

Special Instructions:

Follow Up:

Open Small Bowel Resection

The small bowel is the top part of your intestines. It is also called the small intestine. It is part of the digestive system. When food leaves the stomach, it goes into the small bowel. Most food is then absorbed into the body. However, the small bowel can become blocked or harmed by disease. In this case, part of it may need to be removed. This procedure is called a small bowel resection. One type of procedure is called an open resection. This means the surgeon will make a long cut (*incision*) to open your abdomen. Part of the small bowel will be taken out through this opening. You will probably need to stay in the hospital for several days after the procedure. Then you will continue recovering at home.



LET YOUR CAREGIVER KNOW ABOUT:

- Allergies to food or medicine.
- Medicines taken, including vitamins, herbs, eyedrops, over-the-counter medicines, and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or numbing medicines.
- Any history of bleeding problems or blood clots.
- Previous surgery.
- Other health problems, including diabetes and kidney problems.
- Possibility of pregnancy, if this applies.

RISKS AND COMPLICATIONS

- Bleeding.
- Infection.
- A blood clot that forms somewhere in your veins and travels to the lung.
- Leaking of intestinal fluids into the abdomen.
- A hernia. This occurs when the abdomen bulges out.
- Damage to other organs in the abdomen.

- Scarring where the incision is made or inside your body, around the intestines.
- Not being able to absorb enough vitamins and nutrition through the small bowel.

BEFORE THE PROCEDURE

- A medical evaluation will be done. This may include:
- A physical exam.
- Tests to make sure you are healthy enough for a procedure. These may include blood tests and X-rays. Imaging scans may be done to take pictures of the small bowel.
- An open small bowel resection requires medicine that makes you sleep (*general anesthetic*). Ask what you can expect.

PROCEDURE

A small bowel resection can take 1 to 4 hours.

- Your heart rate, blood pressure, and oxygen level .
- You will be given an intravenous line (IV). A needle will be inserted in your hand or arm. It is hooked to a plastic tube. Medicine will flow directly into your body through the IV.
- You might be given a medicine to help you relax (*sedative*).
- You will be given a general anesthetic.
- Several tubes may be put in your body.
- A tube in your throat will help you breathe during the procedure. It also may be used to give you anesthetic gas during the procedure.
- A nasogastric tube will go through your nose and into your stomach. Fluids from your stomach will drain through this tube during and after the procedure.
- A thin tube (*catheter*) in your bladder will drain urine during and after the procedure.
- Once you are asleep, the surgeon will make an incision in the middle of your abdomen.
- The surgeon will find the part of the small bowel that needs to be removed and take it out.
- The surgeon will close the incision with staples or stitches.

AFTER THE PROCEDURE

- You will stay in a recovery area until the anesthesia has worn off. Your blood pressure and pulse will be checked every so often. Then you will be taken to a hospital room.
- Some pain is normal. You will be given pain medicine. Be sure to tell you caregiver if the pain gets worse.
- You will continue to get fluids through the IV for awhile.
- The nasogastric tube usually stays in for a few days.
- After the nasogastric tube is out, you can start eating food again. You will start with liquids. If all is okay, the IV can come out, too.
- You will be asked to get up and start walking within a day. This helps keep blood clots from forming in your legs.
- You may be told to breathe deeply. You may also be told to cough now and then. This keeps your airways open.
- Most people stay in the hospital for 3 to 7 days after this procedure.

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