

# Post-operative Care of the surgical patient: A report and literature summary

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## ABSTRACT

### **Background:**

The post-operative care is so important because it's related with mortality rate and economical loss. Good post-operative care increases prestige of health care system.

**Aim:** The aim of the report to investigative and summarise all other literature which can be useful to practical level.

### **Material and Method:**

All Existing literature has been searched on electronic data base. Peer reviewed research paper on single complication (like pain) also considered. Symposium talks, workshop outcomes, seminar published reports are also considered. Various government official website and their revanath suggestion are also considered. Reputed international data also used analysis.

### **Results:**

By proving good postoperative care, healthcare provider can reduce mortality rate and also economical loss, hence can win confidence of the people in society.

### **CONCLUSION:**

Post-operative complications are highly preventable .By taking small thing into consideration and experience and trained nursing staff could reduce patient's hospital stay and money .Continuous interativations to prevent care failure could improve the reliability<sup>1</sup> .

### **Key word:**

Good postoperative care, Mortality rate, Prestige of healthcare system.

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### **Introduction:**

When Patient leaves the operation theatre (OT), he/she needs quality care. Patients may or may not be conscious depending on type of anaesthesia and surgery. First shifting from operation theatre to PACU unit which is for easy access to experienced anaesthesia providers and surgeon PACU unit has special equipment and medician. It has also advanced hemodynamic pulmonary monitoring and support system.

Highly Skilled nurses and special trained supporting staff frequent assess the blood oxygen saturation level, pulse rate and skin colour, temperature, level of consciousness. They also maintain a patient airway and complain from patient, to respond it quickly .Maintaining a patients Airway, he/has lies on back as shown in fig-1.

Though the purpose of PACU is to provide quality care service at time when patient need badly .Successful and faster recovery of the patient and reducing mortality rate is just by product of this.

It should be sound proof, painted with soft colour and isolated and comfortable .It is also required close observation at input (fluids) and output and maintaining stability<sup>5</sup> .

Counselling with patient about his/her physical status improve in the discharge environment<sup>4</sup>. Patient may you know about minor complication after surgery will improve stress condition.

Importance of postoperative care depends on types of surgery and hospital environment. In several cases patient either readmitted or readmitted to a hospital other than surgical hospital.

### Discussion:

Practical post-operative care can be classify as shown in chart-1 as par text book. It is divided in to 3 or 4 phase of care

Phase 1 Immediate (post -anesthetise)

Phase 2 Intermediate (hospital stay)

Phase 3 Convalescent (As an out patients)

phase 4 After the full recovery purposes of post -operative are to provide quality care, decrease mortality rate and reduce hospital and patient cost. The major complications in post -operative phase are (a) pain (b) hypovolemia(c) pulmonary embolism (d) myocardial myo cordial infection (e) anxiety (t) bleeding (g) infection (h) hypoxia

#### Phase -1

Patient requires intensive nursing care but before that complete history and current status should be discuss by surgeon with PACU nursing staff. In PACU patient requires close observation under skill staff.

Management of Nausea and vomiting BP ranges, allowable hearts rates are required.

If the patient's communication is clear the nurse must be able to anticipated problems and able to solve. Nurse also can communication Hypotension and shock should be avoided.

Opioids and anaesthesia can interfere with balder so urine passing is an important thing.

#### Phase –II

This is the stage at recovery at hospital .the reliving pain and anxiety at hospital stay is important as patient's conscious. Patient's surgical wound needs care for bleeding, brain type and integrity of dressing.

This is the stage the care provider encourage the activity. Taking care of gastrointestinal discomfort is also part of this phase

Partial or complete impairment to forward flow of intential content.

In recovery room trained nursing staff should execute surgeon's instruction for cardio-pulmonary function .They are also taking care of neurological functions.

#### Phase-III

In Phase-II surgeon and nursing staff would teach patient how to take self-care and self-assessment they may teach his/her family or friends who is/are responsible for taking care follow up and next follow up (if it is required ) date and time could be planed as par surgeon's instruction .

#### Phase –IV

This is the phase where care provider and patient are relax, there may change of late complication. Patient must know about such possibilities.

#### Important points and Summary

1. Once surgical procedure is over. Post-operative care starts. It depends on types of surgery and patient's history
2. Post-operative care unit should locate adjacent to operation theatre (OT) or operation room(OR)
3. Frequent assessments of body (physical) parameters (at every is minutes were required.

4. In the immediate post-operative period patients most probably is unconscious .shifting from OT to PACU required special skill.
5. PACU should be isolated, sound proof, patients with soft colour and to maintain ventilation hence to prevent hypoxemia and hypercapnia.
6. Vomiting is common problem in post-operative period .Medication and fluid can be administered as per doctor's advice.  
Example: Inj.Metacloramide, Inj. Ondansetron
7. Heart failure is the risk factor for post-operative mortality<sup>2-3</sup> precise mechanism increase mortality rate remain unknown.
8. Early enteral feeding on first day of operation decrease possibility of any type of infection<sup>4</sup> .
9. Risk of mortality is depend on patient's age and pre-existing history sensitivity about this factor in PACU must be.
10. Recovering of surgical patient is multi-disciplinary approach. Surgeon and anaesthetist have to play major role but at same time nursing staff, physiotherapists, dietician, stoma therapist, Counsellors and Pathologist are important.

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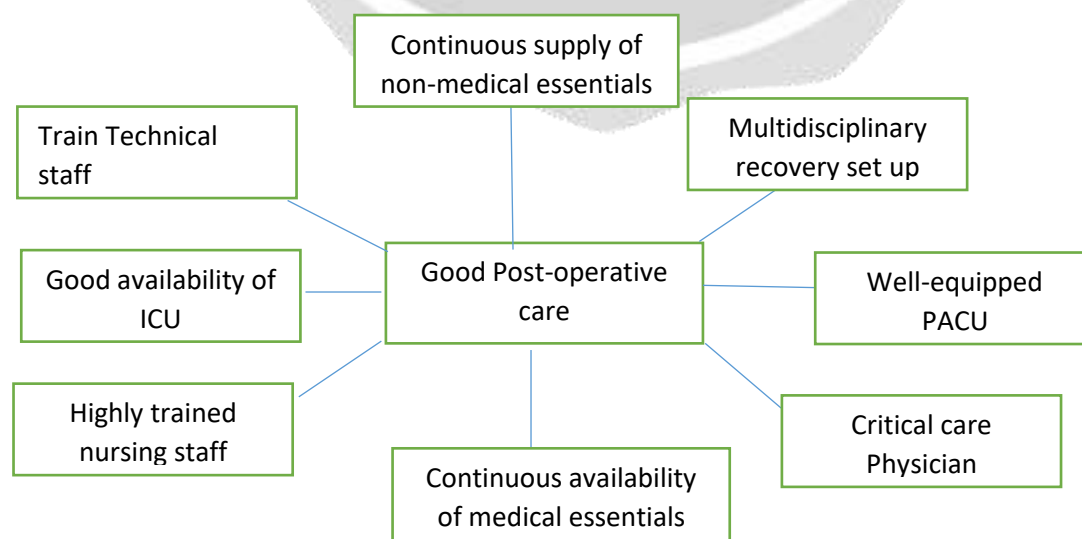


CHART-1

