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This document discusses common management strategies after your surgery. It is a general guide, if there are any concerns please contact your anaesthetist, or your surgeon, Dr Lyndon Chan, via the hospital or rooms.

Please check for any allergies/intolerances you may have before taking any of the medications prescribed.

: Post-operative instructions after Zenker's/Oesophageal pouch Surgery

Pain:

1. Paracetamol 1g every 4 to 6 hours as required
2. Endone 5mg (1 tablet) every 6 hours as required

It is normal to experience mild to moderate throat/neck pain for up to 2 weeks after surgery, this pain may even go to your ears. You do not need to take any analgesia unless you feel it is necessary. Endone should only be used sparingly, and may cause constipation. Prevention of constipation is key, however you can buy some over the counter stool softeners or laxatives if this occurs. Endone can also cause drowsiness and you should not drive or operating dangerous equipment. It may also cause nausea and vomiting, stop the Endone if you it makes you want to vomit.

Antibiotics: You may be prescribed antibiotics on discharge, take them as directed.

Anti-Reflux Medications:

3. Pantoprazole 40mg (1 tablet), take once per day 30 minutes prior to dinner for 4 weeks.

Reflux can add injury to the operative site, even if you do not have symptoms of reflux you should still take this medication.

Vomiting/Nausea medication:

4. Ondansetron 4-8mg (1 to 2 tablets), take every 8 hours as required

It is very important prevent vomiting as this can put stress on the operative site and cause the repair to come apart. If you feel nauseated, don't wait until you vomit to take this medication.

Activity: You move around as your normally would, but minimise activity for the first 48 hours. Do not spend too much time lying down as this increases the chances of forming a clot in your leg. Avoid heavy lifting (>5kg), strenuous exercise and straining for 2 weeks.

Wound Care: If your surgery required a cut in your neck your sutures will be under the skin and dissolvable. Keep the wound clean and dry. There will be tape sitting over the wound, let it fall off on its own accord, you do not need to replace it if it falls off. It is ok to have a shower and let running water go over the wound, pat it dry afterwards.

Diet: This will depend on the findings in surgery and if your operation needed to be done through a neck incision. Generally, you will be fasted for the immediate post-operative period and I will decide when you can start drinking fluids. If at any point there is increasing pain with swallowing, chest pain, high fevers then stop eating and contact me. Avoid sour foods (citrus, vinegar), overly salty foods, hard/sharp foods (fried foods, chips, hard toast etc) for 2 weeks. Cold foods/drinks will help with pain. Drink plenty of fluids. The following is a guide for the progression of diet

Day of surgery & hospital stay: Nothing to eat or drink until directed by doctor

Day 1 after surgery: Clear liquids only (if you can see through it, you can drink it)

Day 2 & 3: Any liquids

Day 4 to 10: Soft foods (anything you can eat without chewing)

Day 10 and beyond: Slowly progress diet back to normal.

When is it safe to fly after surgery? You should aim not to fly within 1 month of surgery. If you need to do so, please contact me and we will discuss this further.

When is it safe to recommence blood thinning medication? Unless otherwise instructed, please check with me before starting blood thinning medications. Recommencing these medications will depend on the surgery and the reason you are on such medications.

When to contact us: If any of the following symptoms occur then please contact us on the details located in the header of this document.

1. Vomiting not controlled by prescribed medications
2. Unexpected shortness of breath
3. Severe chest pain or shoulder tip pain
4. Fever not responsive to paracetamol
5. Significant swelling of the neck
6. Loss of voice
7. Inability to swallow
8. Any concerns you may have in regards to the surgery

If for some reason I cannot be contacted, or if it is after hours, then contact me through the hospital that you were operated on. If you consider your problem an emergency, then either call an ambulance or go directly to the closest hospital.

Your Follow Up Appointment: