Enhanced Recovery After Intestinal Surgery (ERAS)

What is ERAS?
Enhanced Recovery after Intestinal Surgery (ERAS) is a treatment approach that helps people recover from intestinal (bowel) surgery faster and with fewer complications.

The benefits of ERAS include:
- Improved outcome of your surgery
- Reduced chances of complications, such as:
  - Infection after surgery
  - Blood clots
  - Pneumonia [new-MOHN-ya]
- Faster recovery time — you will go home from the hospital sooner

How do I prepare for ERAS
The ERAS approach requires you to play an active role in the healing process. Your willingness to do what your healthcare providers ask will help your recovery go better.

Before surgery, you will be asked to:
- Follow all your instructions to prepare your bowel
- Cleanse your body and nostrils with disinfectant wipes or swabs
- Read your assigned education materials

After surgery, you will be asked to:
- Get out of bed as soon as possible
- Eat and drink as soon as possible
- Use mostly non-narcotic pain medications to control your pain

How do I prepare for surgery?
Your surgeon will schedule your surgery so you, your doctors, and hospital staff can plan for your surgery and recovery. Before your surgery:
- Follow all instructions for:
  - Taking laxatives or other bowel cleansers to prepare your intestine
  - Showering and disinfecting your body the night before your surgery
  - Taking antibiotics
- Don’t eat solid food after midnight (12:00 AM) the night before your surgery.
- Do drink clear liquids up until 2 to 3 hours before your surgery. Having enough liquid in your system will speed the return of bowel function. Examples of clear liquids include water, certain sports drinks, apple juice, and any others approved by your care team.
- Arrange for a friend or family member to be your “partner in healing” if possible. Most patients do better if they have a friend or family member who can spend time with them and encourage them to do what their healthcare providers ask.
What happens when I arrive at the hospital?
You will check into the hospital on the day of your surgery. When you arrive, you can expect to:

- Meet with a nurse who will answer any questions you have and prepare you for surgery.
- Clean your body with antiseptic wipes. Using antiseptic wipes before surgery helps prevent infections by keeping germs on your body from getting into an open wound or your bloodstream during the operation.
- Clean your nostrils with a cotton swab and iodine. This is also done to prevent infections. (See the Intermountain fact sheet: Preventing Infection: Cleaning your nose with antiseptic before surgery)
- Put on a clean hospital gown.
- Be given warm blankets.
- Have your blood tested.
- Be given antibiotics, usually by IV (intravenous).
- Meet with your anesthesia (sedation) provider to discuss your anesthesia plan. You will be asleep during your surgery.

What happens after surgery?
The goal of your care after surgery is to return your organs, especially your bowel, to normal function as soon as possible. Your team of specialists will help you by focusing on 3 aspects of care:

- Eating and drinking
- Time out of bed
- Pain management

Eating and drinking
You will be offered clear liquids soon after your surgery. Starting to drink liquids right away will help your bowel recover. Examples of clear liquids include broth, gelatin, popsicles, clear liquid protein drinks, and clear juices. It's important to not drink carbonated drinks and to not drink from a straw as these can cause bloating and nausea.

Your goal is to drink up to 7 eight-ounce glasses of clear liquid during the first day after surgery. By the second day after surgery, you may begin eating solid foods in small, frequent meals. You won't be given anything fried or spicy, and fresh fruits and vegetables will be limited.

Time out of bed
You will be asked to get out of bed soon after surgery. On the day of your surgery, you'll need to be out of bed at least 1 to 2 times. This can mean sitting in a chair, standing, walking, or a combination of these.

In the days following surgery, you will be asked to spend more and more time out of bed – as much as 3 to 6 hours each day. Moving around in this way will encourage your bowel to function in its normal way. This will speed your recovery and reduce complications.
**Pain management**

The goal of pain management is to reduce your pain enough that you can do the activities that help you heal. You may still feel some pain.

After your surgery, your pain will be controlled using mostly non-narcotic medications, such as acetaminophen (Tylenol) or ketorolac (Toradol). Non-narcotic medications help your organs quickly return to their normal function.

If needed, medications such as opioids (narcotics) may be prescribed. While in the hospital, these medications can be given through an epidural catheter, directly into your bloodstream through an IV, or by mouth. Because narcotic pain medications can slow healing and because they have a risk of addiction, you and your doctor will work closely together to ensure proper use.

Your doctor may use other methods of pain control as well. Your healthcare team will explain these to you if they are used.

**Rating your pain**

It’s important for you to let your healthcare providers know how much pain you’re feeling. This helps them make adjustments to your medication. When describing your pain, use the pain rating scale below. A pain rating of 0 means you have no pain. A pain rating of 10 means you have the worst pain imaginable.

![Pain Assessment Tool](image)
**When can I go home?**
Your doctor will decide when it’s okay for you to go home. This will depend on whether or not you are able to:

- Eat the recommended diet
- Pass gas or have a bowel movement
- Move around at an appropriate level
- Control your pain with oral medications (pills)

**What do I do when I go home?**
Before leaving the hospital, you will meet with a nurse to go over your homecare plan.

When you get home, you will need to do these things as part of your recovery:

- **Continue to take your oral pain medications** exactly as ordered by your doctor.
- **Only eat and drink the foods recommended by your surgeon.** It helps to eat several small meals over the course of the day instead of 3 larger meals.
- **Go for short walks several times a day.** Try to spend most of the day out of bed — either walking or sitting in a chair.
- **Go to all follow-up appointments** with your surgeon. You will get instructions on when to schedule your appointments.

About 30 days after your surgery, you will get a phone call from a nurse to see how you’re doing. They will ask about the care you received during your stay in the hospital.

**When should I call my doctor?**
Call your doctor if you experience any of the following:

- Increasing abdominal (belly) pain or bloating
- Nausea or vomiting lasting longer than 4 hours
- Fever of 101°F (38.3°C) or higher
- Trouble breathing
- Chest pain
- Diarrhea that lasts more than 24 hours
- Shaking or chills
- Redness or drainage from your abdominal wound

**Notes**

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