

# Esophagectomy

This Care Map is general overview of what you can expect during your hospital stay, which is typically 7 to 10 days.

Your recovery will be unique to you.

	Hospital Day 1 (day of surgery) Date: _____	Hospital Days 2 to 4 Date: _____	Hospital Days 5 to 6 Date: _____	Hospital Days 7 to 10 Date: _____
<p><b>Comfort</b></p>  <p>Your pain goal:</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will receive pain medicine by intravenous (IV) line in your hand or arm, or through a feeding tube.</li> <li><input type="checkbox"/> You will talk with your nurse about your pain and how to manage it.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will receive pain medicine by IV or through a feeding tube.</li> <li><input type="checkbox"/> Your nurse will ask you about your pain level.</li> <li><input type="checkbox"/> You may try integrative therapies (such as relaxation and massage).</li> <li><input type="checkbox"/> Tell your nurse if you are having trouble sleeping. You and your nurse can talk about reducing visitors, changing your daytime routine, or taking medicine to help you sleep.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will receive pain medicine as needed.</li> <li><input type="checkbox"/> Your doctor will decide if you should take pain medicine by IV, by mouth, or by a feeding tube.</li> <li><input type="checkbox"/> Have integrative therapies if they are helpful.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will receive pain medicine by mouth or by feeding tube.</li> <li><input type="checkbox"/> Have integrative therapies if they are helpful.</li> </ul>
<p><b>Breathing</b></p> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> Use the incentive spirometer every hour while you are awake and take deep breaths.</li> <li><input type="checkbox"/> An oxygen machine will check the oxygen level in your blood.</li> <li><input type="checkbox"/> You may receive oxygen.</li> <li><input type="checkbox"/> You may have a hoarse or weak voice.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> If your oxygen levels are OK, your nurse will remove the oxygen from your nose.</li> <li><input type="checkbox"/> Use the incentive spirometer every hour while awake.</li> <li><input type="checkbox"/> An oxygen machine will check the oxygen level in your blood.</li> <li><input type="checkbox"/> You may have a hoarse or weak voice.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Use the incentive spirometer every hour while awake.</li> <li><input type="checkbox"/> If your hoarse or weak voice continues, your doctor may want you to see a special doctor (ear, nose and throat, or ENT) to check your vocal cords.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Use the incentive spirometer 5 or 6 times a day.</li> <li><input type="checkbox"/> Take deep breaths and cough often.</li> </ul>

	<b>Hospital Day 1 (day of surgery)</b> Date: _____	<b>Hospital Days 2 to 4</b> Date: _____	<b>Hospital Days 5 to 6</b> Date: _____	<b>Hospital Days 7 to 10</b> Date: _____
<b>Tests, Labs and Procedures</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will receive fluids and antibiotics (medicine) through your IV.</li> <li><input type="checkbox"/> You will have a catheter (thin tube) in your bladder. This will drain your urine.</li> <li><input type="checkbox"/> You may have blood tests.</li> <li><input type="checkbox"/> You may have a chest tube to drain fluid, blood and air from your chest.</li> <li><input type="checkbox"/> You will be weighed.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> If you have a chest tube, you may need a chest X-ray every day until the chest tube(s) are taken out.</li> <li><input type="checkbox"/> You may have blood tests to check for certain levels such as hemoglobin and electrolytes.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will have a swallow study. This is a test to make sure there is not a leak where the esophagus and stomach are connected.</li> <li><input type="checkbox"/> If you have a chest tube, it will be taken out when:               <ul style="list-style-type: none"> <li><input type="checkbox"/> you have little drainage from the chest tube(s)</li> <li><input type="checkbox"/> there is no air leaking from your lungs</li> <li><input type="checkbox"/> you can tolerate the chest tube(s) without suction.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You may have blood tests to check for certain levels such as hemoglobin and electrolytes.</li> </ul>
<b>Food and Drink</b> 	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will not be able to eat or drink anything. Ask your nurse for help with dry mouth or throat.</li> <li><input type="checkbox"/> You will have a tube in your nose that is connected to a suction machine.</li> <li><input type="checkbox"/> You will have an IV (intravenous) line in your arm or hand to give you fluids.</li> <li><input type="checkbox"/> You will have a feeding tube (J-tube) in your small intestine.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> You will not be able to eat or drink anything.</li> <li><input type="checkbox"/> You will have a tube in your nose that is connected to a suction machine.</li> <li><input type="checkbox"/> Tell your nurse if you have throat pain.</li> <li><input type="checkbox"/> You will have IV fluids.</li> <li><input type="checkbox"/> A liquid feeding may be started through the feeding tube on the first or second day.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> <b>If there is no leak during the swallow study:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> the tube in your nose will be removed</li> <li><input type="checkbox"/> you may be able to have ice chips or clear liquids.</li> </ul> </li> <li><input type="checkbox"/> Your tube feedings may continue but be changed to night-time feedings.</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Your surgeon will set your diet.</li> <li><input type="checkbox"/> Ask your nurse if you are not sure about what you can eat.</li> <li><input type="checkbox"/> Tell your nurse if your food makes you cough or throw up.</li> </ul>

	<b>Hospital Day 1 (day of surgery)</b> Date: _____	<b>Hospital Days 2 to 4</b> Date: _____	<b>Hospital Days 5 to 6</b> Date: _____	<b>Hospital Days 7 to 10</b> Date: _____
<b>Activity</b> 	<input type="checkbox"/> You will sit in a chair and may walk with help from your nurse. <input type="checkbox"/> The head of your bed will be raised. <input type="checkbox"/> You will wear special leg wraps (compression device) while you are in bed to help prevent blood clots.	<input type="checkbox"/> You will walk in the hall at least 2 to 4 times a day with help from your nurse. <input type="checkbox"/> Keep the head of your bed raised. <input type="checkbox"/> Wear the leg wraps while you are in bed. <input type="checkbox"/> You may receive blood-thinner medicine to help prevent blood clots. <input type="checkbox"/> You may take a sponge bath.	<input type="checkbox"/> Keep the head of your bed raised. <input type="checkbox"/> Walk in the hall at least 4 to 6 times a day. Walk 1___ Walk 2___ Walk 3___ Walk 4___ Walk 5___ Walk 6___ <input type="checkbox"/> You may meet with Physical Therapy to help regain your strength. <input type="checkbox"/> You may take a sponge bath.	<input type="checkbox"/> Walk in the hall at least 4 to 6 times a day. Walk 1___ Walk 2___ Walk 3___ Walk 4___ Walk 5___ Walk 6___ <input type="checkbox"/> You may take a shower. Cover your incision and tube feedings sites. Your nurse will help you.
<b>Bladder/ Bowel</b> 	<input type="checkbox"/> There will be a catheter placed in your bladder that will drain your urine. <input type="checkbox"/> Members of the nursing staff will help you to the bathroom or a bedside commode if you need to have a bowel movement.	<input type="checkbox"/> Your nurse will remove the bladder catheter by the second day after surgery. <input type="checkbox"/> Tell your nurse if you have problems going to the bathroom. <input type="checkbox"/> Tell your nurse if you are passing gas. <input type="checkbox"/> You will take a stool softener.	<input type="checkbox"/> Tell your nurse if you are passing gas, are constipated, or have loose stools. <input type="checkbox"/> Take medicine to prevent constipation, if needed.	<input type="checkbox"/> Your doctor may want you to keep taking medicine to prevent constipation or have treatment if you have loose stools.
<b>Education</b> 	<input type="checkbox"/> incentive spirometer <input type="checkbox"/> fall prevention and activity <input type="checkbox"/> pain relief <input type="checkbox"/> nasogastric tube	<input type="checkbox"/> how to prevent blood clots <input type="checkbox"/> incentive spirometer <input type="checkbox"/> fall prevention and activity	<input type="checkbox"/> foods and liquids that are OK to eat and drink <input type="checkbox"/> incentive spirometer <input type="checkbox"/> how to care for and flush your J-tube at home	<input type="checkbox"/> Your nurse coordinator will help with your plans for going home and follow-up visits. <input type="checkbox"/> You and your support person will meet with a dietitian. <input type="checkbox"/> You will learn how to care for your incision(s).

	Hospital Day 1 (day of surgery) Date: _____	Hospital Days 2 to 4 Date: _____	Hospital Days 5 to 6 Date: _____	Hospital Days 7 to 10 Date: _____
<b>Plans for Leaving the Hospital (Discharge)</b> 	<input type="checkbox"/> Who will help you at home? <input type="checkbox"/> What are your needs at home? <input type="checkbox"/> Who is taking you home?	<input type="checkbox"/> Talk with your nurse about your plans for leaving the hospital (discharge plan). <input type="checkbox"/> Tell your nurse who your support person will be when you are at home.	<input type="checkbox"/> Talk with your nurse about your plans for leaving the hospital. <input type="checkbox"/> Meet with members of your discharge team to talk about your plans. <input type="checkbox"/> The social worker and home health care nurse will help make plans for your tube feeding at home, if needed.	<input type="checkbox"/> Talk with your nurse if you want your home medicine prescriptions filled at the hospital. <input type="checkbox"/> You are ready to leave the hospital when you: <ul style="list-style-type: none"> <li><input type="checkbox"/> are able to pass gas and have a bowel movement</li> <li><input type="checkbox"/> can urinate without problems</li> <li><input type="checkbox"/> can handle pain with medicines by mouth or through a J-tube</li> <li><input type="checkbox"/> can tolerate your diet</li> <li><input type="checkbox"/> your health care team says you are ready to go home.</li> </ul>
<b>Education</b> 	<p>Your nurses will explain the following before you leave the hospital:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> how to care for your feeding tube</li> <li><input type="checkbox"/> how to change the dressing</li> <li><input type="checkbox"/> how to flush the feeding tube</li> <li><input type="checkbox"/> how to follow your new diet</li> </ul> <ul style="list-style-type: none"> <li><input type="checkbox"/> how to give shots (injections) of blood-thinner, if needed</li> <li><input type="checkbox"/> when to go to your follow-up appointment with your surgeon</li> <li><input type="checkbox"/> whom to call with questions.</li> </ul>			