



Service:
Colorectal

North Bristol
NHS Trust

Enhanced Recovery Programme

Colorectal Surgery



Patient Progression Diary

Exceptional healthcare, personally delivered

Evening Post-Surgery

Eating & Drinking

You can drink as soon as you wish after your surgery

How much did you have to drink on the evening of your surgery?

You can eat 6 hours after your operation

Did you have anything to eat?

Did you manage a Fortisip/juce drink?

Breathing

It is important that you do deep breathing exercises as prevention against chest infection. Please refer to your Enhanced Recovery patient information leaflet.

Have you managed 5 deep breaths every hour?

Mobility

You can start to move around 6 hours after your operation

Have you sat out of bed? _____

Have you done leg exercises?

Are you wearing the stockings to help prevent blood clots?

Pain & Nausea

Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Nausea

Please circle

(none) 0 1 2 3 4 5 6 7 8 9 10 (vomiting)

Stoma Therapy (if stoma present)

Have you looked at your stoma bag? _____

Today's goals achieved? Yes No

If No, please state reason:

Day One after Your Operation

Eating & Drinking

You can eat & drink today

Please circle

Did you have anything to eat? Breakfast / Lunch / Dinner / Snacks

Have you been drinking today? _____

Did you manage Fortisip/juce drinks? 1 2 3

Have you chewed gum? 1 2 3

Mobility, Exercise & Resuming Normality

It is important to sit out of bed, breath deeply and walk throughout the day

Have you sat out of bed and dressed in your own clothes?

Have you managed 5 deep breaths every hour? _____

Have you walked 60 metres today? _____ 1 2 3 4

Are you wearing the stockings to help prevent blood clots? _____

Have you observed the nurse give your Clexane injection ready for when you go home? (If required – Nurse or Dr will inform you) _____

Pain & Nausea



Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Day Two after Your Operation

Eating & Drinking

You can eat & drink today

Please circle

Did you have anything to eat? Breakfast / Lunch / Dinner / Snacks

Have you been drinking today? _____

Did you manage Fortisip/juce drinks? 1 2 3

Have you chewed gum? 1 2 3

Mobility, Exercise & Resuming Normality

It is important to sit out of bed, breath deeply and walk throughout the day

Have you sat out of bed and dressed in your own clothes?

Have you managed 5 deep breaths every hour? _____

Have you walked 60 metres today? _____ 1 2 3 4

Are you wearing the stockings to help prevent blood clots? _____

Have you practiced giving your Clexane injection with nurse supervision ready for when you go home? (If required - Nurse or Dr will inform you) _____

Pain & Nausea

Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Nausea

Please circle

(none) 0 1 2 3 4 5 6 7 8 9 10 (vomiting)

Toilet

Have you passed wind? _____

Have you had your bowels open? _____

Have you passed urine (after your catheter is removed)?

Stoma Therapy (if stoma present)

Have you looked at your stoma bag? _____

Have you practiced emptying your stoma bag? _____

Have you practiced changing your stoma bag with help? _____

Today's goals achieved? Yes No

If No, please state reason:

Day Three after Your Operation

Eating & Drinking

You can eat & drink today

Please circle

Did you have anything to eat? Breakfast / Lunch / Dinner / Snacks

Have you been drinking today? _____

Did you manage Fortisip/juce drinks? 1 2 3

Have you chewed gum? 1 2 3

Mobility, Exercise & Resuming Normality

It is important to sit out of bed, breath deeply and walk throughout the day

Have you sat out of bed and dressed in your own clothes?

Have you managed 5 deep breaths every hour? _____

Have you walked 60 metres today? _____ 1 2 3 4

Are you wearing the stockings to help prevent blood clots? _____

Have you practiced giving your Clexane injection with nurse supervision ready for when you go home? (If required - Nurse or Dr will inform you) _____

Pain & Nausea

Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Nausea

Please circle

(none) 0 1 2 3 4 5 6 7 8 9 10 (vomiting)

Toilet

Have you passed wind? _____

Have you had your bowels open? _____

Have you passed urine? _____

Stoma Therapy (if stoma present)

Have you practiced emptying your stoma bag? _____

Have you practiced changing your stoma bag with help? or independently? _____

Today's goals achieved? Yes No

If No, please state reason:

Day Four after Your Operation

Eating & Drinking

You can eat & drink today

Please circle

Did you have anything to eat? Breakfast / Lunch / Dinner / Snacks

Have you been drinking today? _____

Did you manage Fortisip/juce drinks? 1 2 3

Have you chewed gum? 1 2 3

Mobility, Exercise & Resuming Normality

It is important to sit out of bed, breath deeply and walk throughout the day

Have you sat out of bed and dressed in your own clothes?

Have you managed 5 deep breaths every hour? _____

Have you walked 60 metres today? _____ 1 2 3 4

Are you wearing the stockings to help prevent blood clots? _____

Have you practiced giving your Clexane injection with nurse supervision ready for when you go home? (If required - Nurse or Dr will inform you) _____

Pain & Nausea

Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Nausea

Please circle

(none) 0 1 2 3 4 5 6 7 8 9 10 (vomiting)

Toilet

Have you passed wind? _____

Have you had your bowels open? _____

Have you passed urine? _____

Stoma Therapy (if stoma present)

Have you practiced emptying your stoma bag? _____

Have you practiced changing your stoma bag independently? _____

Do you feel ready to be discharged home with your stoma?

Today's goals achieved? Yes No

If No, please state reason:

Day Five after Your Operation

Eating & Drinking

You can eat & drink today

Please circle

Did you have anything to eat? Breakfast / Lunch / Dinner / Snacks

Have you been drinking today? _____

Did you manage Fortisip/juce drinks? 1 2 3

Have you chewed gum? 1 2 3

Mobility, Exercise & Resuming Normality

It is important to sit out of bed, breath deeply and walk throughout the day

Have you sat out of bed and dressed in your own clothes?

Have you managed 5 deep breaths every hour? _____

Have you walked 60 metres today? _____ 1 2 3 4

Are you wearing the stockings to help prevent blood clots? _____

Have you practiced giving your Clexane injection with nurse supervision ready for when you go home? (If required - Nurse or Dr will inform you) _____

Pain & Nausea

Pain score

Please circle

(no pain) 0 1 2 3 4 5 6 7 8 9 10 (intolerable pain)

Nausea

Please circle

(none) 0 1 2 3 4 5 6 7 8 9 10 (vomiting)

Toilet

Have you passed wind? _____

Have you had your bowels open? _____

Have you passed urine? _____

Stoma Therapy (if stoma present)

Have you practiced emptying your stoma bag? _____

Have you practiced changing your stoma bag independently? _____

Do you feel ready to be discharged home with your stoma?

Today's goals achieved? Yes No

If No, please state reason:

**PATIENT
APPROVED** 

How to contact us:



Enhanced Recovery Nurses
0117 414 3610 / 0117 414 3611



Colorectal nurses
0117 414 0514



Stoma Care Nurses
0117 414 0270 / 0117 414 0262



www.nbt.nhs.uk

If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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**take part...
be involved...**
in research



While in our care, you may be invited to take part in a research study.
To find out more visit:
www.nbt.nhs.uk/research



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