



GOING HOME AFTER SURGERY

Returning to Normal Activities after an Operation

Patient Information

Going Home after Surgery, RIE v1.0

Approved by the Patient Information Team, Feb 2023 Review: Feb 2026

LOT2626

Introduction

Going home from hospital after surgery is a really **positive step in your recovery**. It means you can continue increasing the amount you are moving and start returning to normal activities.

During your time in hospital you will have received excellent support from a whole range of professionals. For some people, going home may be a daunting step. But it is important to know **that leaving hospital does not mean that you are leaving this support behind**.

This booklet provides answers to some common questions about going home after surgery. There is also information about how to access additional support should you need it.

A Helping Hand

Recovering from surgery puts a physical strain on your body. It is important to **keep moving to improve your recovery** and reduce the risk of complications. But it is also likely you will be more tired than normal. Make sure you **get plenty of rest as well as staying active**.

This is where some extra help from your friends and family can be very important.

Preparing to go home after surgery can begin even before you come to hospital by making arrangements with your friends and family for support while you recover.



This might include getting help with looking after children, elderly relatives or pets, or help with shopping and cooking after you get home.

Eating and Drinking

After surgery, you should aim to eat a healthy balanced diet to provide the energy and nutrients your body needs to recover. You should also keep yourself well hydrated.

You may find that your appetite is reduced. It may be easier to eat and drink small amounts more often. You may find foods affect you differently. Introducing foods gradually in small portions can help identify any which cause problems.

Bowel Habit

If you have had abdominal surgery, it is not unusual to have a change in your bowel habit. It may take several months for your bowel movements to return to normal, - however these changes usually settle with time.



Constipation

- ▶ Drink plenty of fluids - aim for 8 - 10 cups per day
- ▶ Eat food high in fibre such as wholemeal bread, cereal or fruit and vegetables
- ▶ Mobilise early after surgery

Diarrhoea

- ▶ Drink plenty of fluids to avoid dehydration
- ▶ Reduce high fibre foods for a short period of time
- ▶ Avoid fatty or fried foods, spicy food and tea or coffee
- ▶ Eat little and often

If you continue to lose weight after your operation, please speak to your GP. They will be able to give you some advice and may refer you to a dietitian.

Mobility and Exercise

It is important to keep active during your recovery - this has many benefits:



You should **gradually increase the amount you are doing each day**, aiming to walk a little bit further, or for a bit longer, each time.

Why not ask your family and friends to help you with this? Visits and phone calls from family and friends can cheer you up and encourage you to reach your goals.

Rest to Recover

Recovering from surgery puts an extra physical strain on the body. So it is important when you are not being active that you **get good amounts of rest**.

Good quality sleep is also really important. Be careful that you don't tire yourself out from too many visitors.

Pain Relief

As you recover from your operation your pain will improve. The amount of pain medicine you need will decrease.

By the time you are ready to go home, you may still be taking some painkillers. It is important that you **continue to gradually reduce the amount you are taking after you go home**. The doctors and nurses will help provide you with a plan for how to do this.

If you are taking strong painkillers, such as long-acting opioids, you should aim to **gradually reduce and stop these within 2 weeks**. You may need the occasional dose of short-acting opioid, but should not be using these for longer than 4 weeks after you go home.

If you feel like you still need strong painkillers for more than 4 weeks after going home, **it is important to discuss this with your GP**.

Day Surgery

After some operations, it may be possible for you to go home the same day as your surgery. This is called **Day Surgery**.

If you are going home the same day as your surgery you will **not be allowed to drive home**. You will need a **responsible adult to pick you up**, or accompany you in a taxi, and **someone to be at home with you for at least 24 hours** after the operation.

Remember that if you have had a general anaesthetic, for the **first 24 hours** make sure you:

- ✗** Do not drive or operate any mechanical or electrical machinery
- ✗** Do not sign legal documents
- ✗** Do not drink alcohol or take sleeping tablets

Wound Care

Before you leave hospital the nurses will show you how to look after your wound and provide you with spare bandages and dressings.

If you have stitches, or staples, that need removed you should make an **appointment with the nurse at your GP surgery 10 - 14 days after your operation.**

It is **important that you keep your wound clean and dry** to give it the best chance of healing.

You should look out for the following signs of a wound infection:



If you have any concerns about your wound, please speak to your GP or the nurse in your GP practice.

Vaginal Bleeding

It is not uncommon to have some vaginal discharge or bleeding vaginally after surgery. This can be red, pink or brown in colour. If your bleeding is heavy like a period or with blood clots you should contact the ward directly. If you have an offensive smell to the discharge this could indicate an infection, so please contact your GP for advice.

Bleeding and/or discharge can continue for 10 days to two weeks following surgery and then should settle. Heavy bleeding (soaking through sanitary towels every 30 minutes) or passing clots is not normal and you must seek urgent care. Tampons should not be used during this time.

If you have a fever and feel generally unwell, you should contact us on the telephone numbers provided.

Resuming Intercourse (sex)

It is advisable to avoid intercourse for 6 - 8 weeks following surgery. We advise that you wait until any vaginal bleeding has stopped. If your womb and ovaries have not been removed and you are not wishing to get pregnant, contraception is important to consider, as you will continue to ovulate after surgery and you can fall pregnant.

Surgically Induced Menopause

If you have had your ovaries removed you may experience menopausal symptoms. You may have been counseled already regarding how best to manage menopausal symptoms. Not everyone will be eligible to use hormone replacement therapy (HRT), and alternatives will be discussed with your medical team.



Search: www.fpa.org.uk – This has information on menopause and the symptoms

Driving

If you drive, it is important that you **do not return to driving before you are ready**.



Strong painkillers can affect your concentration and make you drowsy. You should **not drive while you are still taking strong painkillers**.

There are **two important tests** you should do to **check that you are ready to drive**:

1. **Make an emergency stop without pain** - sit in the driver's seat while the car is parked and press very firmly on the brake pedal to check
2. **Be able to turn freely to look over both shoulders** - make sure you can easily see both blind spots

If you have any concerns about your ability to drive you should **speak to your GP**. If you are still **not able to drive 3 months after** your operation you **should tell the DVLA**.



Driver & Vehicle
Licensing
Agency



Search: [Surgery and driving - GOV.UK](https://www.gov.uk/government/topics/surgery-and-driving)
(www.gov.uk)

You could be fined up to £1,000 if you do not tell DVLA about a condition that might affect your ability to drive safely. You could also be prosecuted if you have an accident.

Time Off Work

If you work, the amount of time you need off will be different for everybody. It will depend on the:

- Type of operation you've had
- Type of job you do
- Speed of your recovery

Speak to the doctors looking after you in hospital before you leave about how much time you should take off work.

Phased Return

Returning to normal activities, including returning to work, is an important part of your recovery.

You should speak to your employer about going back to work. It may be possible for you to have a phased return. This is where you return to work but do fewer hours, or less physical work, at the start, and then gradually increase how much you do.

Letter for your Employer

If you need less than 1 week off work you do not need a letter from a doctor and can self-certify.

If you are likely to need more than 1 week off work, the doctors on the ward can give you a letter before you leave hospital. If you end up needing longer off work than originally planned, you should speak to your GP.

Getting Home

You won't be able to drive home after your operation and will need a responsible adult to pick you up, or accompany you in a taxi.

Before you leave the hospital the nurses will **go through your medication with you**. They will tell you about any changes to your medication or any new medicines. They will also make sure you have a good supply of each medicine.

When you leave hospital, a letter will be sent to your GP telling them about your operation and any changes to your medicines.

Discharge Lounge

The discharge lounge is a comfortable and relaxed environment in which you can wait to be collected by friends, family or patient transport.

On the day you are due to go home, you may be moved to the discharge lounge to allow your bed to be available for another patient.

The discharge lounge is on the ground floor of the Royal Infirmary of Edinburgh at the main entrance.

Sources of Support

Once you are home from hospital there are several places you can get support or advice if you need it.

WHO CAN I CALL?

Depending on what type of surgery you have had, you may be given the details of a patient advice line if you have concerns after your operation.

There are lots of other people who can also help you after your surgery:

GP and NHS 24

For all other concerns not relating to your operation, please contact either your own GP or NHS 24 by phoning 111.



If you feel it is an emergency, you should dial 999 informing them that you had recent abdominal surgery at the Royal Infirmary of Edinburgh or the Western General Hospital.

**Specialist
Nurse**

If you had surgery for cancer you can contact your Specialist Nurse for advice.



Your Specialist Nurse is



Cancer Navigation Hub: **0300 123 1600**

FOLLOW-UP

Surgeon

You will be sent an appointment to see your surgeon in a clinic. This is normally a few weeks after your operation.



Research

NHS Lothian is committed to supporting clinical research. If you are eligible for any research studies, someone from the research team may contact you with information that you can read. If you do not wish to take part in any research, this will not affect your clinical care in any way.

More Information

Other booklets available in this series include;

- 1** **FIT FOR SURGERY**
- 2** **HAVING A GENERAL ANAESTHETIC**
- 3** **DAY OF SURGERY**
- 4** **GETTING GOING AFTER SURGERY**
- 5** **PAIN RELIEF AFTER SURGERY**

This publication includes text taken from the Royal College of Anaesthetists' (RCoA) leaflet '*Fitter, Better, Sooner (2018)*', but the RCoA has not reviewed this as a whole.