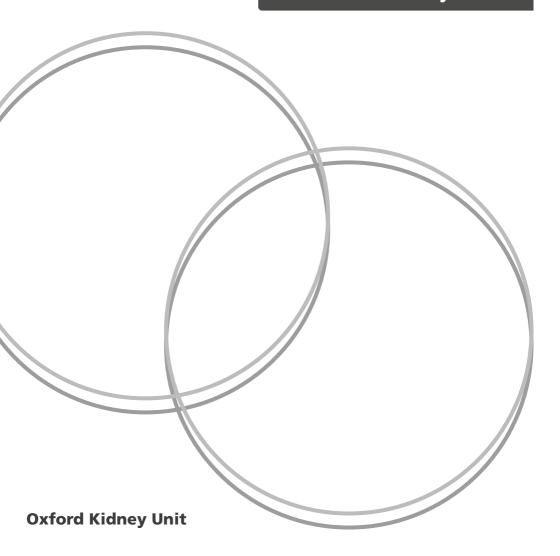


# Preparing for an operation

Information for people with chronic kidney disease



You have been given this booklet to help you prepare for a surgical procedure under general anaesthetic or sedation. It gives you information about your surgery and what to do about your medications. This is to check any medical problems that might need to be treated before your operation, or if you need special care during or after your operation. Your pre-operative assessment nurse will explain this in more detail.

Date of operation (morning or afternoon):							
Operation:							
ype of anaesthesia:							
urgeon:							
lospital:							

# Preparing for your operation and anaesthetic

Please bathe or shower with soap and water and wash your hair the day before or on the day of your operation. This reduces the risk of developing an infection. You may not be able to shower or bath for a while after your operation. Your nurse will let you know how long you cannot shower or bathe for.

All jewellery, including earrings, should be removed before your operation. If you have other piercings, please discuss this with a member of the pre-operative assessment team. If you wear a wedding ring this can be left on and will be taped over during the operation. Please remove any make-up or nail varnish from your fingers and toes.

Make sure you have a supply of paracetamol (remember to follow the directions on the packet). Anti-inflammatory drugs (such as ibuprofen) can cause kidney damage, so please check with your kidney doctor or a member or the pre-operative assessment team before using these.

If you are having a peritoneal dialysis (PD) catheter inserted you should avoid any tablets containing codiene. Codeine causes constipation, which can cause catheter problems. It is rare to need stronger pain killers, a PD nurse can advise you what to take if you should need these.

You will also need a responsible person to look after you for the first 24 hours after your operation, when you return home. If this is not possible, please tell your pre-operative assessment nurse.

### **Smoking and alcohol**

Do not smoke on the morning of your surgery. If possible, try to give up smoking altogether or cut down before you are due to come into hospital. Smoking reduces the amount of oxygen in your blood and increases the risk of breathing problems during and after an operation. The longer you give up beforehand the better. We can refer you for a smoking cessation programme and provide you with nicotine replacement.

Do not drink alcohol or use recreational drugs for 12 hours before your admission. These can alter the effects of the anaesthetic.

# Cancelling and re-arranging your surgery

If you develop a cough, cold or high temperature a few days before your operation, or don't feel well enough to have your operation, please contact the Patient Access Team.

Telephone: **01865 228 674** or **01865 222 983** 

### What do I need to do if I'm on dialysis?

- If you are on haemodialysis (HD), show this leaflet to your dialysis nurse. You may need to dialyse on a different day around the time of your operation.
- If you are on peritoneal dialysis (PD), show this leaflet to your PD nurse. You may need to change your dialysis treatment.

# What to bring with you on the day of your operation

## Please remember to bring the following things with you:

- all of your medications, including insulin and inhalers
- dressing gown, slippers and toiletries
- something to pass the time while you are waiting for your operation.

#### If you have diabetes, you should also bring:

- glucose tablets or clear sugary drink (e.g. non-diet cola or lemonade)
- your blood glucose testing equipment, if you use this.
   Your blood glucose will also be checked using hospital equipment throughout your stay.

### **Eating and drinking**

Please make sure that you follow the fasting (starving) instructions. Fasting is very important before an operation. You need an empty stomach during surgery so that you do not vomit while under a general anaesthetic.

Continue to eat normally up to 6 hours before the time of your admission. You should then stop eating food and certain drinks; these include milk drinks, milk substitutes, fruit juices with bits in, snacks, boiled sweets, mints and chewing gum.

## Before your operation, please follow the instructions in the table below:

#### If your operation is in the morning (am list):

- Do not eat any food or have certain drinks (see above)
   after 2 00am
- Drink clear fluids, such as black tea, clear diluted squash or water, up until 6.30am. After 6.30am you should have nothing to eat or drink.

#### If your operation is in the afternoon (pm list):

- Eat breakfast before 7.30am, then do not eat any more food or have certain drinks (see above) after this time.
- Drink clear fluids, such as black tea, clear diluted squash or water, up until 11.30am. After 11.30am you should have nothing to eat or drink.

### When you arrive at hospital

Do not eat or drink anything, unless instructed by the nursing staff.

### Where will I have my operation?

You will find this information on the letter from the admin team and at the beginning of this leaflet.

#### **Churchill Hospital**

#### **Ashley Day Surgery Unit**

Telephone: 01865 225 283

Please park in car park 1, enter through the main entrance. Proceed to level 1 (there is a lift or stairs). The Day Surgery Unit is on the right, next to the League of Friends cafe.

### **Horton Hospital**

#### **Day Case Unit**

Telephone: **01295 229 767** or **229 383** 

This can be reached from the Oxford Road entrance.

Please park in car Park 5.

Car parking charges apply, some of the car parks are card only and do not take cash.

There are disabled parking spaces available at both hospitals.

# What time should I arrive for my surgery?

- If your operation is in the morning, please arrive at **7.30am**.
- If your operation is in the afternoon, please arrive at **11.30am**.

# What should I do about my medications?

You may need to stop or omit some medications on the day of your operation. A Nurse will let you know of any changes. You may take your medications up to one hour before your operation, with a small amount of water (up to 150mls or one small cup).

If you take a medication (such as warfarin, axpixiban or clopidogrel) to thin your blood we will give you specific instructions either before or at your pre-operative assessment.

You may need to stop these before your operation or be given an alternative medication to take before and after your operation.

Changes to medications needed:								_										

# Medications to take before a peritoneal dialysis (PD) catheter insertion

The day before your operation take:

- 10 senna tablets at 2.00pm
- 1 sachet of Citramag at 4.00pm

Add the sachet of Citramag to 200mls of hot water in a large cup or jug and wait for 30 minutes for it to cool, before drinking.

Within the hour you may experience diarrhoea, so stay near to a toilet. The effect may last for up to 4 hours. Eat and drink normally during this time. Sometimes Citramag may cause you to feel sick and bloated, however this should pass quickly.

### Information for people with diabetes

If you have diabetes, the nurse will highlight which section of the table you should follow during your pre-operative assessment.

#### What should I do if I take insulin for my diabetes?

Details of what you should do on the day before or on the day of your operation are in the following table.

Pre-operative insulin dose adjustment table							
Your insulin treatment	Day of operation						
Once daily long-acting (e.g. Abasaglar, Lantus, Levemir, Toujeo, Tresiba, Humulin I, Insulatard, Insuman	Morning insulin Take 80% of your normal insulin in the morning.  Afternoon operation						
Basal, animal isophane, zinc	Take 80% of your normal insulin dose.						
suspension or protamine zinc insulin).	Once daily in the evening Take 80% in the evening the day before your operation. Take your usual evening dose on the day of the operation.						

Your insulin treatment	Day of operation
Intermediate-acting (twice daily)	Morning operation Take half of your usual morning dose and usual dose in the evening.
	Afternoon operation Take half of your usual morning dose and usual evening dose.

Your insulin treatment	Day of operation
Twice daily pre-mixed insulin with meals (e.g. Novomix 30, HumulinM3, Humalog Mix 25 or 50, Hypurin porcine 30/70 mix, Insuman Comb 15, 25 or 50).	Morning operation Take half of your usual morning dose. Resume normal insulin with evening meal.  Afternoon operation Take half your usual morning dose with breakfast. Resume normal insulin with evening meal.

Pre-operative insulin dose adjustment table (continued)							
Your insulin treatment	Day of operation						
Multiply daily injections  Basal = long acting insulin, e.g. Abasaglar, Lantus, Levemir, Toujeo, Tresiba.  The day before your operation  If your basal insulin is given in the evening or night only take 80% of your usual dose.	Morning operation Take 80% of your usual dose of your basal (long-acting) insulin.  Afternoon operation Take 80% of your usual dose of your basal (long-acting) insulin.						
Bolus = short acting insulin, meal time, e.g. Actrapid, Novorapid, Humalog.	Afternoon operation Take your usual morning short-acting (bolus) insulin dose. Leave out your lunchtime short-acting (bolus) insulin dose.						
Your insulin treatment Continuous Subcutaneous	Day of operation  The pre op assessment nurse will contact						
i.e. insulin pump at home.	the Diabetes team for advice.  Please bring with you your cannula, giving set and cartridges.						

If your insulin is not listed here, please let the pre-operative assessment team know.

#### Non-insulin medications

#### **DPP - 4 inhibitor**

(e.g., sitagliptin, alogliptin, linagliptin).

Take as usual the day before and on the day of your operation.

#### GLP - 1 analogue

(e.g., liraglutide, exenitide).

Take as usual the day before and on the day of your operation.

Metformin (no contrast)

**Take** these on the day of your operation.

#### Sulphonylurea

(e.g., gliclazide, glibenclamide)

**Do not** take on the day of your operation.

#### **SGLT2** inhibitors

(dapagliflozin, canagliflozin, empagliflozin, ertuglifozin) **Stop them the day before your operation. Restart them** 

**1 week after your operation unless otherwise advised**. If you are having major surgery we may suggest you stop them 72 hours prior to an operation.

If you take a combination of tablets and insulin, please follow the guidance for each of them separately.

# What do I do if my blood glucose is low before I get to hospital?

If you have any symptoms of low blood glucose, such as sweating, dizziness, blurred vision or shaking, please test your blood glucose if you are able to do so.

- If your blood glucose is less than 4mmol/l (or you are not able to test your blood glucose), take 4 glucose tablets or 150 millilitres of a sugary drink (this is the same as half a standard sized can of non-diet cola).
- Please tell staff at the hospital that you have done this, because
  it is possible that your operation may have to be rearranged for
  another day.

### What happens after my operation?

- After your operation your blood glucose will be checked and you will be given additional insulin, if necessary.
- When you feel able to eat after your operation, you will be offered food and drink.
- You should follow the instructions on pages 9, 10 and 11 about your diabetes medications.
- Your blood glucose levels may be higher than usual for a day or so.

#### How to contact us

## Peritoneal Dialysis Unit Churchill Hospital

Telephone: 01865 225 792

(8.00am to 6.00pm, Monday to Friday) (answerphone outside of these hours)

#### Renal Ward Churchill Hospital

Telephone: **01865 225 780** 

(24 hours)

#### **Day Surgery Unit**

Telephone: 01865 225 283 or 01865 225 284

Please leave any non-urgent messages if no one is available

to take your call.

#### Vascular Access Specialist Nurses Churchill Hospital

Telephone: 01865 225 373

Please leave any non-urgent messages if no one is available

to take your call.

## Renal Access Co-ordinator Churchill Hospital

Telephone: 01865 228 674

Please leave any non-urgent messages if no one is available

to take your call.

#### **Useful websites**

#### **Oxford Kidney Unit**

Lots of information about the Oxford Kidney Unit for patients and carers.

Website: www.ouh.nhs.uk/oku

#### **Kidney Patient Guide**

Information for patients with kidney failure and those who care for them.

Website: www.kidneypatientguide.org.uk

#### **Kidney Care UK**

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidneycareuk.org

#### **Six Counties Kidney Patients Association**

The SCKPA is run for patients by patients or family members.

They offer support to people suffering from kidney disease or who are on dialysis. They work closely with the Oxford Kidney Unit and have branches in Oxfordshire, Northamptonshire, Buckinghamshire, and Milton Keynes, and parts of Wiltshire, Gloucestershire and Berkshire.

Website: www.sixcountieskpa.org.uk

#### **National Kidney Federation**

A charity which has lots of practical support and information for people with kidney disease.

Website: www.kidney.org.uk

#### **NHS Choices**

Information about preparing for an operation.

Website: <a href="https://www.nhs.uk/Conditions/surgery/Pages/preparing-for-gurgery/Pa

surgery.aspx

#### **Further information**

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Adapted from Managing Diabetes in Adults Before, During and After Surgery and Procedures OUH Medicines Information Leaflet 2022

Author: Jayne Woodhouse, Advanced Nurse Practitioner Peritoneal Dialysis

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Oxford University Hospitals NHS Foundation Trust

www.ouh.nhs.uk/information



Making a difference across our hospitals

charity@ouh.nhs.uk | 01865 743 444 | hospitalcharity.co.uk

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