

GEELONG VASCULAR SERVICE

A/PROF DAVID NEALE MCCLURE

M.B.,BS.(Melb), M.S.(Melb), F.R.A.C.S., F.R.A.C.S.(Vascular) **Vascular & Endovascular Surgeon**Provider no: 057413PB

15A The Esplanade (P.O. Box 2065) Geelong Vic 3220 Phone: +61 3 5229 0024 Fax: +61 3 5229 2819

Email: <u>GeelongVascular@grvs.com.au</u>
Web: <u>www.geelongvascular.com.au</u>

POST OPERATIVE CARE FOLLOWING CAROTID ENDARTERECTOMY

These notes are intended to assist you in your care following discharge from hospital after carotid artery surgery.

Immediately following your surgery it is anticipated that you will spend the first evening in Intensive Care. As your surgery has been performed under local anaesthetic you should be able to eat and drink normally on arrival in the ward. You will have a dressing on your neck wound and may have a drain tube exiting from your lower neck in order to collect any blood that may ooze from around your operative site. The nursing staff will keep a close eye on your wound site, your blood pressure and pulse rate, and your neurological state at frequent intervals during the evening. The following morning you will be transferred to the general ward. Your drain tube will be removed and your neck wound dressing changed. You will be free to mobilise gently around the ward during the day, attend to your showering and toiletry needs as normal, and relax in bed. Your neck may be a little swollen and/or bruised at this time. If it is uncomfortable the pain should be well controlled with Panadeine tablets. Numbness in the neck will be apparent but should not be a problem. It is expected that you will be ready for discharge from hospital the following day.

Following discharge:

- 1. **Wound care**: The dressing on your wound will be removed before discharge. You should be able to shower freely without covering this wound. It has dissolving sutures, which do not need to be removed. For some time you will have a sensation of swelling in the neck and an area of numbness around the scar. If you are a male and accustomed to using a hand razor, you will need to take care in those areas where the skin remains numb. In the majority of patients the numbness settles over a 4-6 week period. On some occasions areas of numbness will persist indefinitely.
- 2. **Pain**: Your neck wound may be a little uncomfortable for the first 1-2 weeks. If should never be so painful that the ache cannot be controlled with oral analgesics like Panadol or Panadeine. Two Panadol tablets every 4 hours is permitted. If pain in the neck is excessive, and not relieved by 2 Panadol tablets, you should inform us at Geelong Vascular Service.
- 3. **Mobility:** For the first 2-3 weeks following your surgery you may feel a little lethargic, and in need of regular rest. This is quite normal. While you may engage in most of your normal activities, any movement that increases the strain on your neck is likely to pull on your neck wound and should be avoided. It would be wise to restrict yourself from heavy lifting or pushing for 4-6 weeks following your operation. Walking is good exercise, but active gym work and sporting pursuits like golf or bowling should be avoided for 4 weeks. Provided you feel comfortable of being able to stop in an emergency, there is no reason for you not to be able to drive a motor vehicle.
- 4. **Warnings:** Excessive pain, swelling of your neck, or bleeding from your wound is not expected. If any of these occur please let us know.
- 5. **Review appointment:** Arrangements will be made for your review appointment with A/Prof David McClure at the time of your hospital discharge. This is usually made for 6 weeks. An ultrasound of your neck arteries will be undertaken prior to this visit.
- 6. Our staff at Geelong Vascular Service will be happy to handle any concerns you may have should you need to call Monday to Friday 09.00 16.30 hours.

I trust your hospital stay is a pleasant one. If you have any queries please do not hesitate to contact me.

Yours sincerely,

A/Prof David McClure Vascular & Endovascular Surgeon