Living Liver Donation Surgery: After Hospital Care

The following provides helpful information to assist you as you recover from liver donation surgery. Be sure to follow any added guidelines provided by your physician or nurse.

If you have any questions or concerns, please call the Transplant Clinic at 312.695.8900.

Contact information
You may contact us 24 hours a day, 7 days a week at 312.695.8900.
- During business hours (8 am to 5 pm Monday-Friday), please ask for the Donor Transplant Nurse Coordinator.
- For urgent issues during non-business hours, an answering service will take your call. Please ask them to page the on-call nurse.

Follow-up appointments
You will receive a list of all of your follow-up appointments before your discharge. If you do not receive this list or you lose the list please call 312.695.8900.

It is extremely important that you go to your follow-up appointments even if you feel well. Your follow-up appointments are approximately at 5 months, 11 months and 23 months after transplant. If you need to reschedule, please call the office.

When to call the physician
Call your physician or transplant nurse coordinator if you notice any of the following:
- Temperature greater than 101.0 degrees F
- Chills
- Increased warmth of your skin, swelling or inflammation (redness)
- Changes in color, odor or amount of drainage from your incision
- Increased tenderness or soreness around the wound
- Abdominal (belly) pain
- Yellowing of the skin
- Light-colored stool
- Nausea, vomiting, diarrhea, or constipation that does not go away
- Inability to urinate
- Pain that is not controlled by the medicine your physician has ordered

**Incision care**

It is important to keep your incision clean and dry to prevent infection. This will help your incision heal. Do not take tub baths until the incision is healed and staples, drains and the paper strips of tape (Steri-Strips®) have been removed. Wash your hands before and after touching your incision. To clean your incision each day:
- Wash the wound gently with clean water and mild soap.
- Do not soak the area.
- Gently pat dry; do not rub.

Do not use lotions, creams or ointments on the wound unless they have been ordered by your physician. You should wear comfortable clothing. Do not wear soiled or tight clothing over the wound. Leave the Steri-Strips on the skin over your incision until they fall off. These offer extra support as your incision heals. The stitches are absorbed into your body and do not need to be taken out. No other dressing is needed. Some bruising around the wound is common.

Report these signs of infection to your physician:
- Increased redness, swelling or pain at the site
- Thick drainage or pus from the incision

**Drain care**

You will go home with a Jackson-Pratt® (JP) drainage tube. Your nurse will show you how to take care of your drain before you go home. You will need to strip (milk), empty and record your drain output at least 2 times a day. You will receive a log to record your drain output. Bring this log to your next physician’s visit.

When handling your drain, remember to:
- Wash your hands before and after you touch your drain.
- Milk the tubing before you empty the drain.
- Empty the drain at least 2 times a day or when it becomes half full.
- After you empty your drain, be sure to squeeze the bulb before closing the plug.
- Record the amount you empty on the log.

Call your physician or transplant nurse coordinator if you notice any of the following:
- New or increased pain around the tube
- Redness, swelling or warmth around the incision or tube
- Drainage that is foul-smelling
- Fluid leaking around the tube
- Stiches become loose
- Tube falls out
- JP bulb does not hold suction
- Change in color of drainage (bright red or greenish/yellow)
- Change in the amount of drainage

**Activity**

You may gradually increase your activity. Try to get up and walk every 1 to 2 hours while you are awake. Rest if you get tired. Avoid strenuous activity including heavy exercise until you talk with your physician. Do not lift anything weighing more than a gallon of milk (less than 10 pounds) for 8 to 10 weeks. Check with your physician or transplant nurse coordinator before you start driving. Often, patients can start driving 1 to 2 weeks after surgery. You should not drive while you are taking narcotic or prescription pain medication.

**Sexual activity**

Many people have questions about resuming sexual activity after surgery. As long as you feel good and are well rested, you can gradually resume sexual activity. Certain positions may be more comfortable until the wounds heal.

**Work**

Most patients take 8 weeks off work to recuperate. Patients whose jobs involve heavy physical work may be off work for a longer time. Please talk with your physician or transplant nurse coordinator about when you can go back to work.

**Showering**

You may shower. Do not soak the incision site. Do not sit in a tub bath until your JP drains are out.

**Pain medication**

It is common to have pain after surgery. You may have discomfort from the incision and muscle aches. Getting up and moving around can ease some of the discomfort. Brace your incision with a pillow when you cough or sneeze.

Most often, your physician will prescribe pain medicine. Take your pain medicine as ordered. Some medicine may upset your empty stomach. To prevent nausea, you should take the medicine with some kind of food. If you are on a liquid diet, drink some juice or broth (something more than plain water) before you take your medicine.

Call your physician if you have any side effects, such as:

- Nausea or vomiting
- Headache
- Rash
- Drowsiness
- Dizziness
- Constipation
Some of your pain medicine may contain acetaminophen. Acetaminophen can cause liver damage if you take too much. Be sure to read labels carefully and check with your pharmacist about your medicine. If you are taking Tylenol® (acetaminophen) for pain, do not take more than 3000 mg in 24 hours. Norco® also contains acetaminophen. Check with your physician about the 24-hour limits that are right for you.

**Diet**

Follow a full liquid diet and move up to a gastrointestinal (GI) soft diet as tolerated until your first physician’s visit.

A full liquid diet consists of:
- Tea
- Juice
- Jell-O®
- Milkshakes
- Pudding
- Popsicles
- Strained creamy soups

A GI soft diet is a low-fiber, low-residue diet composed of foods that are soft, easily digested and well tolerated, such as:
- Pasta, noodles, white rice
- Tomato/vegetable juice
- Banana, applesauce, canned and well-cooked fruits
- Yogurt, low-fat milk, cheese
- Tender, well-cooked meats, poultry, fish, eggs

Continue to take all medicine that the physician has prescribed. It is important to drink 8 to 10 glasses of water (64 to 80 ounces) each day.

Do not drink any alcohol for 3 to 4 months after surgery. This includes, but is not limited to:
- Beer (alcoholic and non-alcoholic)
- Wine and wine coolers
- Liquor

Talk with your physician or transplant nurse coordinator before you start drinking alcohol.

Sometimes patients develop constipation after surgery due to inactivity and narcotic pain medicine. You can avoid constipation by drinking plenty of fluids and staying active. Your physician may order a medicine that helps constipation. Bowel function should return to normal within 1 week.
Stress and emotions

It is common and even healthy for organ donors to have many different emotions about the donation process. Emotions may range from positive to negative, often within a very short period of time. This is a normal reaction to being an organ donor. Negative feelings may increase during times when the pain and medical symptoms are worse. Your feelings will improve as you are feeling better. Below is a list of common feelings you may have and how to deal with them.

Depression
Sadness is a healthy emotion. But if sadness lasts longer than 2 weeks, it may be a sign of depression. Signs of depression may include:

- Loss of interest in activities that you used to enjoy
- Difficulty concentrating, forgetfulness
- Lack of motivation and being more fatigued
- Poor sleep or changes in sleep pattern
- Loss of appetite or big weight changes
- Feeling hopeless or guilty
- Tearfulness or crying spells
- Body aches and pains
- Irritability and anger
- Decreased sexual desire
- Withdrawing from others or low self-esteem
- Thoughts of harming yourself

Call the transplant clinic if you have some of these feelings for 2 weeks or longer.

Anxiety
Fear and anxiety can happen when you worry about the unknown. To ease anxiety, try to remain focused on things that you can control. For example, you can control keeping your appointments, exercising and eating a healthy diet. It is important to keep a positive outlook.

Stress
Chronic stress can strain your body systems and can cause damage over time. It is very important for those with a weakened immune system to limit stress. Ideas to help reduce stress include:

- Getting enough sleep
- Avoiding tobacco, alcohol and illegal drugs
- Meditating through prayer or yoga
- Doing things that bring you joy and laughter
- Relaxing by taking baths, listening to music or writing
- Doing deep breathing exercises
Living liver donation patient handbook

Please reference your patient education handbook that you received before surgery. If you do not have this handbook, please ask for one from your nurse before discharge or call the transplant clinic.

Northwestern Medicine—Health Information Resources

For more information, contact Northwestern Memorial Hospital’s Alberto Culver Health Learning Center (HLC) at hlc@nm.org, or by calling 312.926.5465. Health information professionals can help you find the information you need and provide you with personal support at no charge.

For more information about Northwestern Medicine, please visit our website at nm.org.
Jackson-Pratt (JP) Drain Output Log

Wash your hands and milk the tubing before emptying the drain.
Empty the drain and record the amount at least 2 times a day.

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