

If you have any questions or concerns, please ask your physician or nurse.

Laparoscopic Esophageal Surgery: After Hospital Care

This information is provided to assist you in your recovery after laparoscopic esophageal surgery.

Activity

Slowly increase your activity each day. Your activity level will be guided by how your body feels. Walking is encouraged.

For 2 weeks:

- Do not lift anything heavier than 10 lbs.
- Avoid climbing a flight of stairs more than 2 to 3 times per day.

Avoid sitting for prolonged periods of time, which may increase your risk for blood clots. Walk around every 2 hours while awake. When sitting, elevate your feet.

You may tire easily for about a week. This is normal after surgery. Rest if you get tired.

Try to get a good night's sleep. Taking pain medication before activity or at bedtime may be helpful.

Your physician will advise you on returning to work. Most patients usually return to work in 1 to 2 weeks.

Many people have questions about resuming sexual activity after surgery. If you feel good and are well rested, sexual activity may be resumed. Avoid positions that strain the incision site.

Driving

You may resume driving when you are free from incision pain and when you feel you can react appropriately in an emergency. Do not drive while taking pain medicine.

Bathing

You may shower 24 hours after surgery. Do not soak the incision site. Avoid lotions, creams, or powders near the wound.

Wound care

Keep your incision clean and dry. Use a mild soap to gently clean the incision site. Carefully pat dry and do not rub. Inspect the site daily. Some bruising or redness can be expected. Itching or a small amount of drainage also is normal. Excessive redness, swelling, pain or drainage from the incision may be signs of an infection. Report these signs to your physician or nurse.

The small incisions were closed with a dissolving suture and either skin glue (Dermabond®) or small tape strips (Steri-Strips®). The Steri-Strips will begin to curl up within 5 to 7 days. The strips can be removed if they have not fallen off on their own in 10 days.

Medications

Be sure to follow your physician's guidelines for all medications. Unless otherwise directed, the antacids and other medications for reflux should be stopped. For mild discomfort, you may take plain Tylenol® (acetaminophen). Follow dose directions, but do not take more than 4,000 mg of acetaminophen in 24 hours. This includes other medicines that you may be taking.

- Many medicines including narcotic pain medicines have acetaminophen in them. Be sure to read labels carefully or check with your pharmacist to be sure. It is important that you look at your total intake of acetaminophen. Do not take more 4,000 mg of acetaminophen in 24 hours.
- Talk with your physician about 24-hour limits that may be proper for you. Patients who are fasting/undernourished, have diabetes, are taking isoniazid, or are frequent alcohol users may need to limit acetaminophen to just 2,000 to 3,000 mg per day—in divided doses. It is possible your physician may tell you not to take acetaminophen at all.

Do not take any other medicines containing acetaminophen.

Take pain medication with food to prevent nausea. To avoid constipation, drink plenty of fluids along with eating fiber or bran. If needed, you may take an over-the-counter stool softener, such as Colace®. Take it as directed.

Diet

After esophageal surgery, certain foods may be hard to swallow. Start with a full liquid or pureed diet for 1 to 2 weeks after surgery. When it gets easier to swallow foods, follow a “mechanical soft—no bread” diet until your post-op physician's visit. Eat 6 to 8 small meals per day. This helps you get all the needed nutrients. When eating, take small bites and chew your food well to help aid swallowing. If you have a “sticking sensation” while swallowing, relax and give the food a chance to pass. Try eating foods that are more liquid than solid, such as yogurt or protein shakes if sticking persists.

Food Group	Suggested	Avoid
Beverages		Carbonated drinks, iced drinks.
Milk/milk products	All	Any containing coconut, nuts, seeds or dried fruit.
Meats and alternatives	Tender or minced, moist meat, fish and poultry with gravy or sauces. Moist casseroles, stews, soft-cooked eggs, cottage cheese, cheese sauces. Smooth peanut butter, legumes and lentils.	Dry, tough or stringy meats (such as spareribs); nuts, seeds, crunchy peanut butter; stringy, cooked cheese (such as mozzarella).
Breads/cereals	Hot cereals, well-soaked cold cereals, well-cooked pasta.	All breads, cookies, cakes, crackers, rolls, coffee cake, donuts, pita, tortillas, toast. Very coarse cereals, such as bran. Any cereal with fresh or dried fruit, coconut, seeds or nuts. Toast, crackers.
Fruits/vegetables	Canned/cooked fruits and vegetables; use vegetables in soups, sauces, stews Fruit and vegetable juices.	All raw or dried fruit. All raw, stringy or barely cooked vegetables. Raw salads.
Desserts and snacks	Puddings, ice cream, ice milk, frozen yogurt, sherbet, fruit ices, popsicles, gelatin made from allowed foods.	Popcorn, chips, tacos; any containing coconut, nuts, seeds or dried fruits.
Fats and oils	All	None

Outlined on the next page are foods that are soft, moist and easy to digest. Avoid gummy foods, such as bananas and breads, which can be hard to swallow. To meet your nutrient needs, it is important to select items from each of the food groups listed.

Special instructions

Call your physician's office to schedule your follow-up appointment.

When to call the physician

- Temperature of 101 degrees F or higher.
- Increased swelling, redness or tenderness at incision site.
- Drainage from your wound.
- Severe pain not controlled by medication.
- Persistent nausea or vomiting.

If you have any additional questions or concerns, please call your physician.

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.

Para asistencia en español, por favor llamar al Departamento de Representantes para Pacientes al 312.926.3112.

The entities that come together as Northwestern Medicine are committed to representing the communities we serve, fostering a culture of inclusion, delivering culturally competent care, providing access to treatment and programs in a nondiscriminatory manner and eliminating healthcare disparities. For questions, please call either Northwestern Memorial Hospital's Patient Representatives Department at 312.926.3112, TDD/TTY 312.926.6363 or the Northwestern Medical Group Patient Representatives Department at 312.695.1100, TDD/TTY 312.926.6363.

Developed by: NMH Surgical Nursing, Ambulatory Surgery Unit, Department of Surgery with Nutrition Services