Medical
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Contact Information for Colorectal Unit, Western General Hospital

				7
Pre-Admission Clinic / DOSA	0131	537	2379	
• Ward 23	0131	537	1564	
• Ward 24	0131	537	1560	
Ward 58 (Surgical HDU)	0131	537	3558	
Enhanced Recovery Nurse	0131	537	5205	

This diary has been adapted from the original document produced by Salford Royal NHS Foundation Trust. NHS Lothian would like to thank them for their permission to use this document.



Enhanced Recovery

- Patient Diary

Getting better sooner

"I found filling the diary in each day beneficial. I was able to chart my progress and see a difference e.g. eating more each day and being able to shower myself. I found it an encouragement"

Margaret (patient)

Name (Optional):	
Date of Surgery:	

What is enhanced recovery?

The aim of the Enhanced Recovery Programme is to get you back to full health as quickly as possible after your operation. Research has shown that the earlier you are out of bed and eating and drinking the better. This will speed your recovery and make complications less likely to develop.

What to expect....

During your recovery, you can expect to feel some pain and perhaps a bit sick at times. The nursing staff will give you medication to manage this. You will also feel very tired and this can take several weeks to return to normal. Your appetite may be reduced and your bowels will be erratic for a while after your op.

Day of your operation

You will hopefully be admitted on the day of your operation so try and keep your activities as normal as possible before you come into hospital. You may be given some special Carbohydrate drinks that are designed to prepare you for your operation. Once you have had your operation, we will aim to sit you up in bed or out in the chair if you are able to. You will be able to drink as you wish and you may be offered a supplement drink or light snack

Day One

It is important to get you up and about as much as possible so today you should expect to be sitting out of bed and taking short walks with the nursing staff. If possible, we will remove your catheter, drip and any other lines that will allow you to get around easier. You will hopefully be allowed to eat a light diet and we would expect you to continue drinking free fluids as you feel able.

Day Two

You should now be able to move around easier and you should be eating and drinking. We will encourage you to be as independent as possible and encourage you to get dressed if you feel able to.

Day Three

Ideally, you should be thinking about getting home in the next day or so. If you have a stoma, the nurses will work with you to learn how to look after this yourself and the stoma team will support you as required.

Enhanced recovery patient diary

This diary will help chart your progress and will give you the opportunity to comment on how you are feeling during your stay in hospital. We would be grateful if you would take some time to complete this diary every day, as it will help you to reflect on how you are doing. It also gives us important feedback to improve your experience and enhance your recovery. We will be looking specifically at things such as: Moving around / pain and nausea / eating and drinking / How are you feeling?

Confidentiality

All the information you provide will be treated in the strictest of confidence. The diary is completely anonymous, so you don't need to write your name anywhere in it. However, if you would like to receive feedback on your comments there is space to add your name at the front of the diary.

What will it involve me doing?

Completing the diary is voluntary and your care will not be affected in any way if you chose not to write in it. You can write down your thoughts and feelings as soon as you are given the diary. Please circle the answers that best show how you are feeling and whether you feel you are able to achieve our shared plan. Please discuss your diary entries with the nurse caring for you.

Will the staff know I am keeping a diary?

All staff will be aware that you are writing a daily diary and fully support and respect your feelings and thoughts. Staff may ask you questions about your diary entries during the day e.g.

- How are you feeling?
- Are you comfortable?
- How much sleep and rest have you had?
- What are you proud of achieving?

What will happen to the diary once I have completed it?

Please return your diary on discharge and hand to a member of staff on the ward. We will look at the diary to see if we can learn about your experience to improve our service. We will then look at your comments and share them with the ward team, to provide them with feedback.

"How you are feeling" feedback

There are a series of words on the back page that describe how you might be feeling throughout your hospital journey. We would appreciate it if you could take a few moments to highlight the key words that best describe how you are feeling at each stage of your recovery and other hospital experiences. These include "Talking to staff" and "First contact with the service" etc.

Day of Discharge

Advice:

You should be ready for discharge when you are eating and drinking, managing pain control with tablets and mobilising around the ward on your own. Remember that you will be more tired than usual and it is important to rest regularly, continue with gentle exercise and gradually build on this as your body allows. You should avoid heavy lifting, gardening or heavy housework for a few weeks after your operation.

Action: If you meet certain goals you will be allowed home:

- · Not needing pain control through a drip or injection
- Taking enough solid food and drink
- · Independently mobile or same level as prior to admission
- Medical and nursing team happy with your discharge
- · You and your family are happy with your discharge

 Progress: Your consultant and nursing team should give you an idea of how long you will be in hospital after your operation. This may be 2 – 3 days or 7 days depending on your operation and your recovery.
 The aim of the Enhanced Recovery Programme is to help you recover from your operation better

so that you can go home sooner and continue your recovery at home.

Are you feeling comfortable (pain well controlled)	Yes □	No 🗆
Are you able to mobilise around the ward independently	Yes 🗌	No 🗆
Are you able to eat solid food and drink adequately	Yes □	No 🗆
Do you feel ready to go home	Yes □	No □

First contact with the service	My Recovery	Talking to Staff	My Hospital Experience	Going Home
		Circle the words tha	Circle the words that best describe how you felt	
Нарру	Нарру	Нарру	Нарру	Нарру
Relaxed	Relaxed	Relaxed	Relaxed	Relaxed
Supported	Supported	Supported	Supported	Supported
Included	Included	Included	Included	Included
Comfortable	Comfortable	Comfortable	Comfortable	Comfortable
Safe	Safe	Safe	Safe	Safe
Anxious	Anxious	Anxious	Anxious	Anxious
Out of control	Out of control	Out of control	Out of control	Out of control
Awkward	Awkward	Awkward	Awkward	Awkward
Sad	Sad	Sad	Sad	Sad
Angry	Angry	Angry	Angry	Angry
Worried	Worried	Worried	Worried	Worried
Other:	Other:	Other:	Other:	Other:
		Help us understa	Help us understand why you felt this way	
		0100		

Evening of Surgery

Fluids (includes supplements e.g. Resource / Fortisip)									
• Advice:	Try to drink as much as you feel able to. This should include at least one supplement drink								
• Action:	Write down what you have drunk - Glass of water, juice - Tea / coffee - Supplement drinks								
• Progress:	If you have not had a drink was it because (tick the answer below) Did not wish to have a drink Not offered Other Surgeon did not allow you to have one at this time								
Bowels (It i	is normal for your bowel function to be a bit erratic following your operation) • I have passed wind • I have had a bowel movement Yes No No								
Getting out	t of bed								
• Advice:	Getting out of bed helps with your breathing and circulation after surgery Even though you may have a catheter, drips and tubes it is ok to get out of bed and walk								
• Action:	Have you got out of bed and sat in the chair for 2 hours? Yes \square No \square								
• Progress:	• Progress: If no was it due to? (tick the answer below) ☐ Not feeling well ☐ Not asked by nursing staff ☐ Not feeling comfortable ☐ Other ☐ Not wanting to								
Deep breat	thing								
• Advice:	Deep breathing and coughing is essential to help keep your chest clear								
• Action:	Have you practiced your deep breathing exercises? Yes \square No \square								
	☐ If No, was it due to? (tick the answer below) ☐ Not feeling well ☐ Other ☐ Not feeling comfortable								
	eling comfortable (pain well controlled) Yes No								
Any furthe	r thoughts or feelings								

Day One

Fluids (ind	cludes sup	plemer	nts e.g.	Resour	ce / Fo	rtisip)
• Advice:	Try to drin			-		o. Dlement drinks.
• Action:	- Tea / cof	water,	, juice			o drink.
• Progress	∷If No, was ☐ Not fe ☐ Feelin	eling w	-	k the ar	nswer b	pelow) ☐ Did not like the taste of supplement drinks ☐ Other
Food						
• Advice:		all amo	unts of	food sp	eed up	urgery. your recovery by giving you an appetite and ur bowel work again.
• Action:	Please cir	cle ho	w much	of you	r food y	ou have managed to eat today
	Breakfast Lunch: Tea: Supper:		1/2 1/2 1/2 1/2	3/4 3/4 3/4 3/4	All All All	Any snacks? Please list a few that you've enjoyed
Bowels (I		•		I functio	n to be	a bit erratic following your operation)
	I have particularI have have have			ovemen	t	Yes □ No □ Yes □ No □
Patients v	vith a ston	na plea	ase refe	er to st	oma di	arv.

Day Seven

, .			
Getting o	ut of bed & walking		
• Advice:	It is important to get you up and about as much as poss	sible. This should in	clude short walks
• Action:	I have been out of bed for at least 6 hours today	Yes □	No 🗆
	How many times have you walked today? (please circle	e)	
	1 2 3 4		
	I have been been able to use the Enhanced Recovery to walk 30 metres ☐ Once ☐ Twice ☐ More than twice	walkway today and	l was able
• Progress	☐ Not feeling comfortable ☐	because you were Not wanting to Other Not able to / too we	
Deep bre	athing		
• Advice:	You should be able to do your breathing exercises com If you cannot, especially because of pain, please let us	•	
Action:	Have you practiced your deep breathing exercises? Have you been seen by the physiotherapist today?	Yes □ Yes □	No □ No □
Pain and	nausea		
	Are you feeling comfortable (pain well controlled)?Are you feeling nauseous?Have you vomited?	Yes □ Yes □ Yes □	No □ No □ No □
Any furth	er thoughts or feelings		

Day Seven

Fluids (in	cludes supp	plemer	nts e.g.	Resour	ce / Fo	rtisip)
• Advice:	Try to drin	nk as n	nuch as	you fee	el able t	to.
	This shou	ld incl	ude at l	east thr	ee supp	plement drinks
Action:	Write dow	n wha	t vou ha	ave mai	naged t	o drink
7 104.01.11			-		_	
	- Supplem	nent dr	inks			
• Progress	s:If No, was	it due	to? (tic	k the a	nswer b	pelow)
3	☐ Not fee		-			,
	☐ Feelin	g sick				
	☐ Did no	t like t	he taste	e of sup	plemer	at drinks
Food						
• Advice:	Eating is r	not da	ngerous	after b	owel su	urgery.
					-	your recovery by giving you an appetite and
	making th	e mus	cles an	d nerve	s in you	ur bowel work again.
• Action:	Please cir	cle ho	w much	of you	r food y	ou have managed to eat today
	Breakfast	: 1/4	1/2	3/4	All	Any snacks?
	Lunch:	1/4	1/2	3/4	All	Please list a few that you've enjoyed
	Tea:	1/4	1/2	3/4	All	
	Supper:	1/4	1/2	3/4	All	
-						
Bowels (-	-		el functi	on to be	e a bit erratic following your operation)
	I have pas					Yes □ No □
	I have had	u a bov	wei mo\	rement		Yes □ No □

Patients with a stoma. Please refer to stoma diary

Day One

Getting o	ut of bed	& walki	ing							
• Advice:			•	and about as much a	s possible.	This should i	nclude short walk			
Action:	I have been out of bed for at least 6 hours today Yes □ No □ Not able to / too weak □									
	How ma	ny times	have you	walked today? (please	e circle)					
	1 2	3	4							
	I have be to walk 3	30 metre		se the Enhanced Reco	·	/ay today and	l I was able			
• Progress	☐ Not f	eeling w		o get out of bed / walk	☐ Not a	ause you wer asked by nurs r reason				
Deep bre	athing									
Advice:Action:	If you ca	nnot, es	pecially be	our breathing exercise ecause of pain, please eep breathing exercise	let us know		r. No □			
Action.	•	•	•	e physiotherapist today		Yes □	No □			
Pain and	naucoa									
raili allu	• Are you	u feeling	nauseous	ole (pain well controlled ?	1)?	Yes □ Yes □ Yes □	No			

Day Two

		_		_		
Fluids (in	cludes sup	plemer	nts e.g.	Resour	ce / Foi	rtisip)
• Advice:	Try to dri	nk as n	nuch as	you fee	el able t	0.
	This shou	uld inclu	ude at le	east two	supple	ement drinks.
• Action:	Write dov	vn wha	t vou ha	ave mar	naged to	o drink.
7 101.011.			-		_	
	- Suppler	nent dr	inks			
• Progress	s:If No, was	s it due	to? (tic	k the a	nswer b	pelow)
J	☐ Not fe					☐ Not offered
		ng sick				☐ Other
	☐ Did no	ot like t	he taste	e of sup	plemen	t drinks
Food						
Advice:	Eating is		•			• •
				•	•	your recovery by giving you an appetite and ir bowel work again.
	amig a		0.00 0.1	u 110110	o y o o	sono: non again
• Action:	Please ci	rcle ho	w much	of you	r food y	ou have managed to eat today.
	Breakfast	t: 1/4	1/2	3/4	All	Any snacks?
	Lunch:	1/4	1/2	3/4	All	Please list a few that you've enjoyed
		1/4	1/2	3/4		
	Supper:	1/4	1/2	3/4	All	
Bowels (I		-		I functio	n to be	a bit erratic following your operation)
	• I have p					Yes □ No □
	• I have h	ad a b	owel mo	ovemen	t	Yes ☐ No ☐
Patients v	with a stor	na nle:	ase ref	er to st	oma di	arv.
	4 0.01	p.o.		J Jt	WI	y-

Day Six

Getting or • Action:			•	at least 6 hours to	day.	Yes □	No 🗆			
	How m	any times	s have you	walked today? (p	lease circ	le)				
	1 2	3	4							
		30 metre		se the Enhanced	·	walkway today and I	was able			
• Progress	☐ Not	feeling w			walk was	it because you were: Not wanting to Other Not able to / too we				
Deep brea	thing									
• Advice:										
• Action:	-	=	-	eep breathing exe ephysiotherapist t		Yes □ Yes □	No □ No □			
Pain and I	Pain and nausea • Are you feeling comfortable (pain well controlled)? Yes □ No □ • Are you feeling nauseous? Yes □ No □ • Have you vomited? Yes □ No □									
Any furthe	er thou	ghts or fe	eelings							
) 🗀									

Day Six

Fluids (in	cludes supp	lemer	nts e.g.	Resour	ce / Fo	rtisip)
Advice:	Try to drin			•		to. plement drinks.
• Action:	Tea / coffe	∕ater, j e	uice			o drink.
• Progress	s: If No, was Not fee Feeling Did not	eling w g sick	/ell			
Food						
• Advice:		ll amo	unts of	food sp	eed up	urgery. your recovery by giving you an appetite and ur bowel work again.
• Action:	Please circ	cle ho	w much	of you	r food y	ou have managed to eat today.
	Breakfast: Lunch: Tea: Supper:	1/4 1/4		3/4 3/4 3/4 3/4	All	Any snacks? Please list a few that you've enjoyed
Bowels (-		el function	on to be	e a bit erratic following your operation)
	I have pa I have ha			ovemen	it	Yes □ No □ Yes □ No □

Patients with a stoma please refer to stoma diary.

Day Two

<u> </u>			
Getting o	ut of bed & walking		
• Advice:	It is important to get you up and about as much as p	possible. This should include	de short walk
• Action:	I have been out of bed for at least 6 hours today	Yes □	No 🗆
	How many times have you walked today? (please c	ircle)	
	1 2 3 4		
	I have been been able to use the Enhanced Recove to walk 30 metres ☐ Once ☐ Twice ☐ More than twice	ery walkway today and I wa	as able
• Progress	s: If you have not been able to get out of bed / walk walk walk walk walk walk walk walk	as it because you were: Not wanting to Other Not able to / too weak	
Deep bre	athing		
• Advice:	You should be able to do your breathing exercises of you cannot, especially because of pain, please let	• •	
Action:	Have you practiced your deep breathing exercises? Have you been seen by the physiotherapist today?		No □ No □
Pain and	nauseaAre you feeling comfortable (pain well controlled)?Are you feeling nauseous?Have you vomited?	Yes □	No
Any furth	er thoughts or feelings		

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Day Three

Fluids (in	cludes sup	plemer	nts e.g.	Resour	ce / Fo	rtisip)							
• Advice:	Try to drir			-		to. plement drinks.							
• Action:	- Glass of - Tea / co	Write down what you have managed to drink. - Glass of water, juice - Tea / coffee - Supplement drinks											
• Progress	s:If No, was Not fe Feelin	s it due eling w	to? (tic	ck the a	nswer b	pelow)							
Food													
• Advice:		all amo	unts of	food sp	eed up	urgery. your recovery by giving you an appetite and ur bowel work again.							
• Action:	Please ci	rcle ho	w much	of you	r food y	ou have managed to eat today.							
	Breakfast Lunch: Tea: Supper:	1/4 1/4		3/4 3/4 3/4 3/4	All All All	Any snacks? Please list a few that you've enjoyed							
Bowels ((It is normal	l for yo	ur bowe	el functi	on to be	e a bit erratic following your operation)							
	I have pI have h			ovemen	ıt	Yes ☐ No ☐ Yes ☐ No ☐							
Patients	with a stor	na plea	ase ref	er to st	oma di	ary.							

Day Five

etting o	ut of be	ed & wal	king				
Action:	I have	been ou	t of bed for a	at least 6 hours today.		Yes □	No □
	Harris	4:			-:!->		
	How n	nany time	es nave you	walked today? (please	circie)		
	1 2	2 3	4				
				se the Enhanced Reco	very walkw	ay today and	l I was able
		k 30 met					
	☐ Or	ice	☐ Twice	☐ More than twice			
Progress	s:If you	have not	been able to	o get out of bed / walk v	was it beca	use you were	e:
3	-	t feeling		. .		vanting to	-
	□ No	t feeling	comfortable		☐ Other	r	
	□ No	ot asked b	by nursing st	aff	☐ Not a	ble to / too w	reak
loon bro	othina						
eep bre	auning						
Advice:	You sh	hould be	able to do yo	our breathing exercises	comfortab	ly every hou	r.
	If you	cannot, e	especially be	cause of pain, please I	et us know	4.	
					_		
Action:		-	-	eep breathing exercises		Yes □	No 🗆
	Have	you been	seen by the	e physiotherapist today	?	Yes □	No 🗌
ain and	nausea	3					
	• Are y	ou feelin	g comfortabl	le (pain well controlled))?	Yes □	No □
	-		ig nauseous	?		Yes □	No □
	• Have	e you von	nited?			Yes □	No □
ny furth	or thou	ights or	foolings				
		igints or	icelligs				
			\bigcirc				

Day Five

Fluids (in	cludes sup	plemer	nts e.g.	Resour	ce / Fo	rtisip)
Advice:	Try to drir	nk as n	nuch as	you fee	el able t	to.
	•			-		plement drinks.
• Action:	Write dow	vn wha	t you ha	ave mar	naged t	o drink.
	Glass of v	water, j	uice			
	Tea / coffe	ee				
	Suppleme	ent drir	ıks			
• Progress	s: If No, was Not fe Feelin Did no	eling w g sick	vell			
Food						
• Advice:		all amo	unts of	food sp	eed up	urgery. your recovery by giving you an appetite and ur bowel work again.
• Action:	Please ci	rcle ho	w much	of you	r food y	ou have managed to eat today.
	Breakfast	:: 1/4	1/2	3/4	All	Any snacks?
	Lunch:	1/4	1/2	3/4	All	Please list a few that you've enjoyed
	Tea:	1/4	1/2	3/4	All	
	Supper:	1/4	1/2	3/4	All	
Bowels (It is normal	I for vo	ur bowe	el functi	on to be	e a bit erratic following your operation)
(• I have p	-				Yes □ No □
	• I have h			ovemen	it	Yes □ No □

Patients with a stoma please refer to stoma diary.

Day Three

,	,		-							
Gettir	ng oı	ut of	f bed	& walki	ing					
• Actio	_				_	at least 6 ho	ours today		Yes □	No □
		l ha	ave co	mplete	d my stair		Yes □	No □		
		Ho	w mar	y times	s have you	walked toda	ay? (please	circle)		
		1	2	3	4					
		l ha	ave be	en bee	n able to ເ	use the Enha	anced Reco	very wal	kway today and	I was able
				0 metre				,	, ,	
			Once		Twice	☐ More	than twice			
• Prog	gress	:If y	ou hav	ve not b	een able	to get out of	bed / walk	was it be	cause you were	e:
				eling w					t wanting to	
				_	omfortable			_	ner	
			Not a	sked by	nursing s	staff		□ No	t able to / too w	eak
Deep	brea	thir	ng							
• Advi	ce:	Υοι	ı shou	ld be a	ble to do v	our breathir	na exercises	s comfort	ably every hour	
,					•	ecause of pa	•		•	
• Actio	on:	Ha	ve you	ı practio	ced your d	eep breathir	ng exercises	s?	Yes □	No 🗌
		Ha	ve you	ı been s	seen by th	e physiother	rapist today	?	Yes □	No 🗌
Pain a	and r	nau	sea							
			-	_		ole (pain we	Il controlled)?	Yes □	No □
			•	•	nauseous	s?			Yes □	No 🗆
		• H	ave yo	ou vomi	ted?				Yes □	No 🗌
Any f	urthe	er th	ough	ts or fe	elings					
\odot	\bigcirc)	<u>(_)</u>	(:)	$ \stackrel{()}{\sim} $					
										
										

Day Four

This should include at least three supplement drinks. Action: Write down what you have managed to drink. Glass of water, juice Tea / coffee Supplement drinks Progress: If No, was it due to? (tick the answer below) Seeling well Feeling sick Did not like the taste of supplement drinks Food Advice: Eating is not dangerous after bowel surgery. Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again.							
This should include at least three supplement drinks. *Action: Write down what you have managed to drink Glass of water, juice - Tea / coffee - Supplement drinks *Progress: If No, was it due to? (tick the answer below) Not feeling well Feeling sick Did not like the taste of supplement drinks Food *Advice: Eating is not dangerous after bowel surgery. Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again. *Action: Please circle how much of your food you have managed to eat today. Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Bowels (It is normal for your bowel function to be a bit erratic following your operation) *I have passed wind *Action: Visit is normal for your bowel function to be a bit erratic following your operation)	Fluids (in	cludes supp	olemer	nts e.g.	Resour	ce / Fo	rtisip)
- Glass of water, juice - Tea / coffee - Supplement drinks • Progress: If No, was it due to? (tick the answer below) Not feeling well Feeling sick Did not like the taste of supplement drinks Food • Advice: Eating is not dangerous after bowel surgery. Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again. • Action: Please circle how much of your food you have managed to eat today. Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All No No	Advice:	•			-		
Not feeling well Feeling sick Did not like the taste of supplement drinks Food • Advice: Eating is not dangerous after bowel surgery. Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again. • Action: Please circle how much of your food you have managed to eat today. Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All No □	• Action:	- Glass of - Tea / coff	water, fee	, juice			
• Advice: Eating is not dangerous after bowel surgery. Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again. • Action: Please circle how much of your food you have managed to eat today. Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Number of your bowel function to be a bit erratic following your operation) • I have passed wind Yes □ No □	• Progress	☐ Not fee	eling w g sick	vell			
Even small amounts of food speed up your recovery by giving you an appetite and making the muscles and nerves in your bowel work again. • Action: Please circle how much of your food you have managed to eat today. Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All No Bowels (It is normal for your bowel function to be a bit erratic following your operation) • I have passed wind Yes No	Food						
Breakfast: 1/4 1/2 3/4 All Any snacks? Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Bowels (It is normal for your bowel function to be a bit erratic following your operation) • I have passed wind Yes No	• Advice:	Even sma	II amo	unts of	food sp	eed up	your recovery by giving you an appetite and
Lunch: 1/4 1/2 3/4 All Please list a few that you've enjoyed Tea: 1/4 1/2 3/4 All Supper: 1/4 1/2 3/4 All Bowels (It is normal for your bowel function to be a bit erratic following your operation) • I have passed wind Yes No	• Action:	Please circ	cle ho	w much	of you	r food y	ou have managed to eat today.
• I have passed wind Yes ☐ No ☐		Lunch: Tea:	1/4 1/4	1/2 1/2	3/4 3/4	All All	
• I have passed wind Yes ☐ No ☐							
	Bowels (• I have pa	assed	wind			Yes □ No □

Patients with a stoma please refer to stoma diary.

Day Four

-								
Getting of	out o	f bed	& walki	ng				
• Action:	I h	ave be	en out	of bed for a	at least 6 hours today.		Yes □	No □
	Нο	w mar	ny times	have you	walked today? (please	circle)		
		W IIIGI	19 1111100	navo you	wamou today . (piodoo	0.1010)		
	1	2	3	4				
			en bee		se the Enhanced Reco	very walkw	ay today and	l I was able
		Once		·	☐ More than twice			
• Progres	e·lf v	ou ha	ve not h	een ahle t	o get out of bed / walk	was it heca	use vou wer	٥.
riogics	-		eeling w		o get out of bed / walk		anting to	J.
			•	omfortable		☐ Other	•	
		Not a	sked by	nursing st	taff	☐ Not a	ble to / too w	eak
Deep bre	athi	ng						
• Advice:				-	our breathing exercises			.
A -4:			4!			- 0	V □	NI- 🖂
• Action:		-	-	-	eep breathing exercises e physiotherapist today		Yes □ Yes □	No □ No □
Pain and			feeling	comfortab	le (pain well controlled)?	Yes □	No □
		-	_	nauseous	**	,.	Yes □	No □
		•	ou vomi				Yes 🗌	No 🗆
Any furtl	ner tl	nough	its or fe	elings				
())	\bigcirc	\odot	\odot				
								