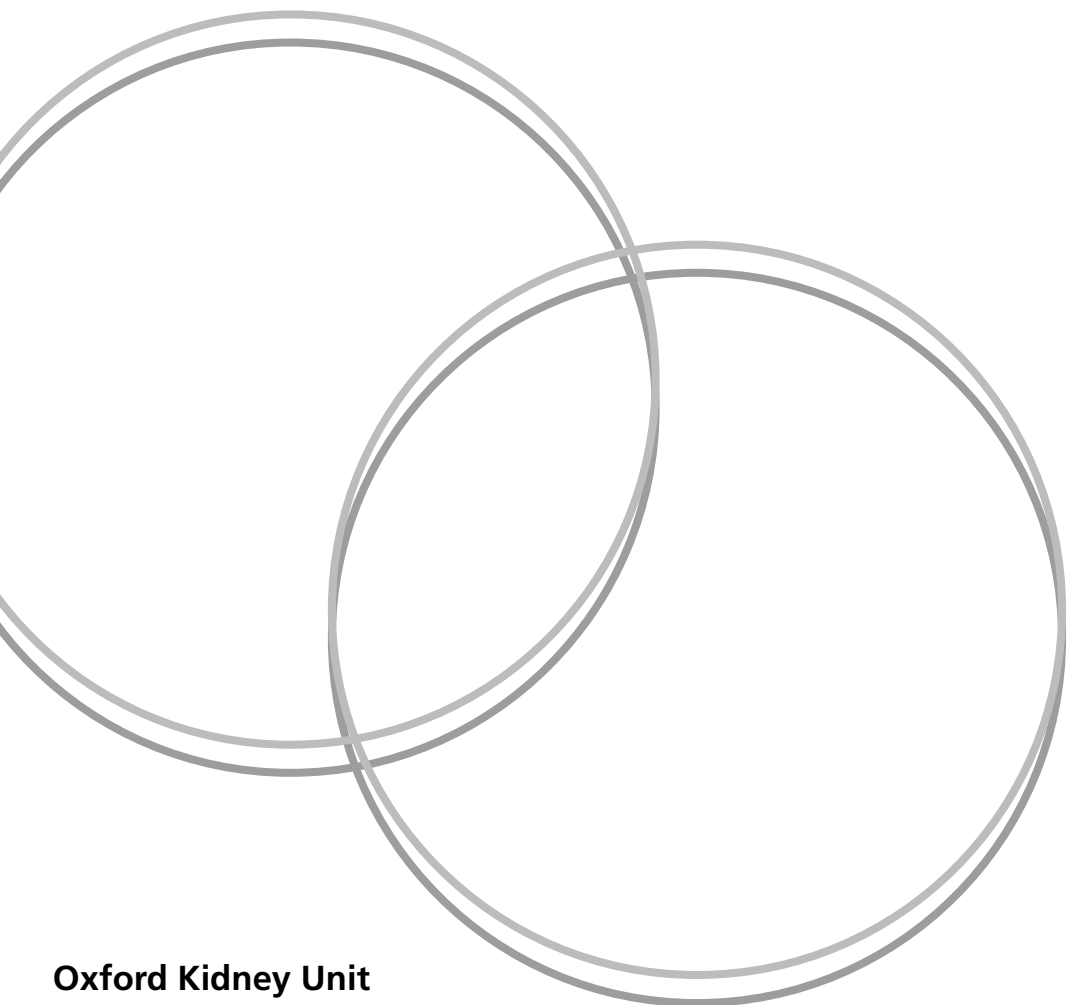




Oxford University Hospitals
NHS Foundation Trust

Preparing for your operation:

**information for people with
chronic kidney disease**



Oxford Kidney Unit

You have been given this booklet to help you prepare for a surgical procedure under general anaesthetic or sedation. It gives you information to help you prepare for your surgery and what to do about your medications. When you have chronic kidney disease you will need more preparation for your surgery, so that you are safe to have an operation. Your pre-operative assessment nurse will explain this in more detail.

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 this may be.

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 of 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.

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.

Tel: **01865 228 674**

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. If you have anything in your stomach whilst you are under anaesthetic, it might come back up while you are unconscious and get into your lungs. This can cause choking or serious damage to your lungs.

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:

<p>If your operation is in the morning (am list):</p> <ul style="list-style-type: none">• 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.
<p>If your operation is in the afternoon (pm list):</p> <ul style="list-style-type: none">• 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 do I need to come to?

If your surgery is at the Churchill Hospital, you will need to go to the Day Surgery Unit, unless otherwise instructed; this is found on Main Street. If you are coming by car, please park in car park 5 and enter the building across the road from the zebra crossing. The Day Surgery Unit is just on the right, next to the League of Friends café.

If you are having surgery at another hospital, the pre-operative assessment team will explain where you should go.

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?

Please take your usual medications (except medication for diabetes) and inhalers as normal, unless you have been instructed to stop them by the nurse at your pre-operative assessment. 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.

Medication required before your operation

If you are having a PD catheter inserted, you will need to take the following medication to make sure that your bowel is empty, the day before your operation:

- 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.

Additional 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?

The day before your operation, you should take your usual dose of insulin as normal. Details of what you should do 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 (evening/night) (e.g. Abasaglar, Lantus, Levemir, Toujeo, Tresiba, Humulin I, Insulatard, Insuman Basal, animal isophane, zinc suspension or protamine zinc insulin)	Morning operation Resume your normal insulin with evening meal Afternoon operation Resume your normal insulin with evening meal
Your insulin treatment	Day of operation
Once daily long / intermediate-acting (morning)	Morning operation Take usual dose Afternoon operation Take usual 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 one-third 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
Twice daily long / intermediate-acting	<p>Morning operation Take half of your usual morning dose Resume normal insulin with evening meal</p> <p>Afternoon operation Take half of your usual morning dose Resume normal insulin with evening meal</p>
Your insulin treatment	Day of operation
Twice daily insulin where you self-mix insulin in your own syringe i.e. separate injections of short acting (e.g. animal neutral, Novorapid/ Humulin S) and intermediate acting insulins (e.g. animal isophane, Insulatard/Humulin I).	<p>Morning operation Your pre-operative assessment nurse will ask for advice from the Inpatient Diabetes Team</p> <p>Afternoon operation Your pre-operative assessment nurse will ask for advice from the Inpatient Diabetes Team</p>
Your insulin treatment	Day of operation
<p>Multiple daily injections (3, 4, or 5 injections daily)</p> <p>(basal = long-acting insulin, e.g. Abasaglar, Lantus, Levemir, Toujeo, Tresiba)</p> <p>bolus = meal time, e.g. Actrapid, Novorapid, Humalog)</p>	<p>Morning operation Take your usual dose of your basal (long-acting) insulin</p> <p>Afternoon operation Take your usual dose of your basal (long-acting) insulin</p> <p>Morning operation Leave out your morning and lunchtime short-acting (bolus) insulin dose(s) Premixed morning insulin, take one-third of your morning dose and no lunchtime dose.</p> <p>Afternoon operation Take your usual morning short-acting (bolus) insulin doses Leave out your lunchtime short-acting (bolus) insulin dose</p>

Pre-operative insulin dose adjustment table (continued)

Your insulin treatment	Day of operation
Continuous Subcutaneous Insulin Infusion (CSII) i.e. insulin pump at home	Morning operation Your pre-operative assessment nurse will contact the Inpatient Diabetes Team for advice Afternoon operation Your pre-operative assessment nurse will contact the Inpatient Diabetes Team for advice

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

What should I do if I take non-insulin medications for my diabetes?

You should follow the table below if you are taking tablets or non-insulin injections.

Pre-operative adjustment for non-insulin medications
<p>Day before going into hospital</p> <p>Take all your diabetes medications as normal</p> <p>If you are taking SGLT2* tablets do not take them 72 hours before your operation.</p>
<p>Morning operation</p> <p>Do not take any diabetes medications</p>
<p>Afternoon operation</p> <p>If you are taking SGLT2* tablets do not take them on the day of your operation</p> <p>If you take GLP-1** antagonist do not take them on the day of your operation.</p> <p>If you are taking any other non-insulin diabetes medications, take your usual treatment with a light breakfast (before 7.30am), then no more until you are eating and drinking after the operation.</p> <p>*SGLT2 inhibitors (dapagliflozin, canagliflozin, empagliflozin, ertugliflozin)</p>
<p>GLP-1** antagonist (exenatide, liraglutide, lixisenatide, dulaglutide, exenatide MR)</p>

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, 11 and 12 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

Tel: **01865 225 792**

(8.30am to 6.00pm, Monday to Friday)
(answerphone outside of these hours)

Renal Ward Churchill hospital

Tel: **01865 225 780**

(24 hours)

Day Surgery Unit

Tel: **01865 225 283/4**

Please leave any non-urgent messages if no one is available to take your call.

Vascular Access Specialist Nurses Churchill hospital

Tel: **01865 225 373**

Please leave any non-urgent messages if no one is available to take your call.

Renal Access Co-ordinator Churchill hospital

Tel: **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: www.nhs.uk/Conditions/surgery/Pages/preparing-for-surgery.aspx

Further Information

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

Adapted from the Protocol for the peri-operative and peri-procedure management of adult patients with diabetes.

Author: Jayne Woodhouse, Advanced Nurse Practitioner Peritoneal Dialysis

September 2020

Review: September 2023

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

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

