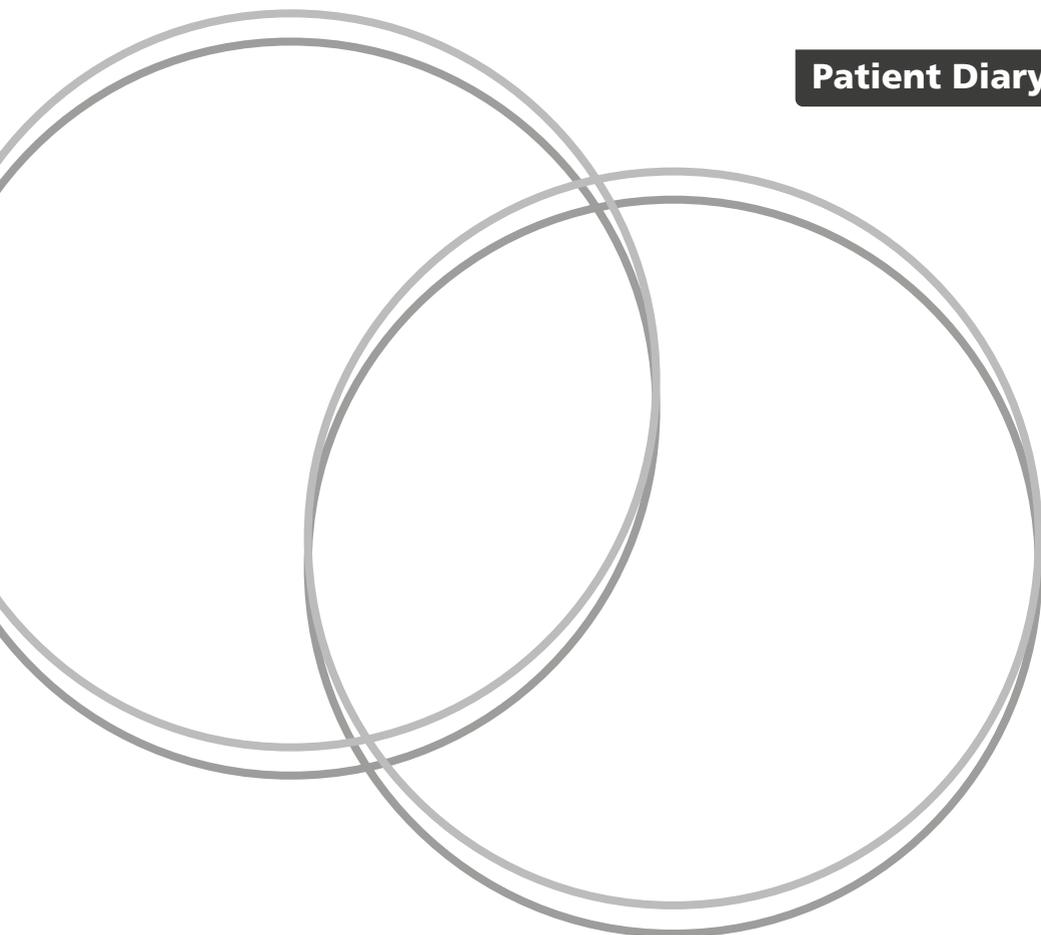


# Enhanced Recovery After Surgery (ERAS)

## Partial Glossectomy or Buccal Resection (with reconstruction)

**Patient Diary**



## What is Enhanced Recovery?

Enhanced recovery is a way of improving the experience and wellbeing of people who need major surgery. It can help you to recover more quickly. The programme focuses on making sure you are actively involved in your recovery.

There are four main stages:

- planning and preparation before admission (including improving your nutrition and physical fitness before surgery)
- reducing the physical stress of the operation
- a structured approach to pre-operative (before surgery), intra-operative (during surgery), and post-operative (after surgery) management, including pain relief and early nutrition
- early mobilisation (getting you moving as soon as possible).

The purpose of this diary is for you to record your thoughts and feelings and to note down your progress during your time in hospital after your operation. We encourage relatives and friends to be involved in your recovery, they can help with your recovery by taking you for walks, provided the nurses agree it is safe to do so.

The diary is designed for you to complete, but your relatives, friends and members of the team looking after you (doctors, nurses, and physiotherapists) can help you to fill it in if you find this difficult.

This diary sets out an example of what to expect in the first few days after your surgery. The programme may not be suitable for everyone. If this is the case for you, the team looking after you can make changes, making sure that the care you receive is not only of the highest quality, but is also designed around your specific needs.

**This document is not legally binding and if your recovery is different to the programme set out, this is nothing to be worried about. We realise that every person is different, and everyone will achieve the goals at their own pace.**

Whilst we hope that you will complete this diary, it will not affect your care if you choose not to.

## Swallow and speech exercises

After your surgery your speech, swallowing and chewing will feel different. As part of your recovery you will need to complete some exercises to strengthen the muscles and help them work together and build your confidence.

Your ward team will inform you when it is safe to start your Swallow and Speech exercises, this would usually be on Day 2 following your surgery.

Take your time with these exercises. Stop if you are experiencing any pain and inform your ward team if you are struggling to complete the exercises.

### Saliva swallows

You might find you have more saliva than usual straight after surgery. This will reduce with time. **Practice swallowing regularly.** This is a natural movement, but you may need to make a conscious effort to do this after surgery.

### Jaw stretch

Your speech therapist may ask you to carry out jaw stretches if appropriate after your surgery. This would require opening your mouth and holding a gentle stretch for 7 seconds.

Repeat this exercise 7 times on each attempt and then do this exercise 7 times in the day.

### Tongue exercise (if you have had a Partial Glossectomy)

Repeat each exercise below 3 times. Aim to complete the exercises 7 times a day.

- Push your tongue out as far as possible, hold that position and then return.
- Put your tongue out and move it as far as possible to the left, repeat on the right side.
- Put your tongue out and lift it up as far as possible.
- Put your tongue out and then down.
- Lick your top and bottom lips.
- Touch each tooth with your tongue in turn, starting from the back.
- Try saying front of tongue sounds: ttt, ddd, lah lah lah.
- Try saying back of tongue sounds: kkk, ggg.

# Day of Surgery

Date/Day

**Plan:** After your surgery you will be cared for in the Churchill Intensive Care Unit (CICU).

## Post-operative Day One

**Plan:** You will be helped to sit out of bed and go for a walk with assistance. You will start receiving nutritional feed (through a tube in your nose) and will be transferred to the ward.

**Mobility:** *(tick if achieved)*

I was able to sit in a chair

I was able to go for a walk

**Nutrition:** *(tick if achieved)*

My nutritional feed was started

**How I feel today:**

# Post-Operative Day Two

Date/Day
----------

**Plan:** Sit out of bed and go for 2 walks with assistance. Your nutritional intake will be monitored, to make sure you are receiving enough calories and nutrition whilst you are not able to eat food. If deemed safe, you can start doing your speech and swallowing exercises.

**Mobility:** *(tick if achieved)*

I was able to sit in the chair for **1-2** hours (am and pm)

I was able to go for **2** walks today

Distance walked ..... (aim for 2x length of ward)

**Nutrition:** *(tick if achieved)*

I was able to tolerate my nutritional feed being increased

**Speech and swallowing exercises:** *(tick if achieved)*

I was able to complete my speech and swallowing exercises

**How I feel today:**

# Post-Operative Day Three

Date/Day
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**Plan:** Sit out of bed. Go for 3 walks with assistance. Continue with your speech and swallowing exercises.

**Mobility:** *(tick if achieved)*

I was able to sit in the chair for **2-3** hours  
(morning, afternoon, and evening)

I was able to go for **3** walks today     
Distance walked ..... (aim for 3x length of ward)

**Nutrition:** *(tick if achieved)*

I was able to tolerate my nutritional feed

**Speech and swallowing exercises:** *(tick if achieved)*

I was able to complete my speech and swallowing exercises

**How I feel today:**

# Post-Operative Day Four

Date/Day
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**Plan:** Sit out of bed. Go for 4 walks with assistance. Get dressed. Continue with your speech and swallowing exercises. Your swallow will be assessed to see if you can start drinking.

**Mobility:** *(tick if achieved)*

I was able to sit in the chair for most of the day

I was able to go for **4** walks today

Distance walked ..... (aim for 4x length of ward)

I was able to get dressed into my own clothes today, with assistance

**Nutrition:** *(tick if achieved)*

I was able to tolerate my nutritional feed

My swallow was assessed and (if safe) I was able to have some sips of water

**Speech and swallowing exercises:** *(tick if achieved)*

I was able to complete my speech and swallowing exercises

**How I feel today:**

# Recovery Goals and Targets

## – Day Four Onwards

The first few days of your recovery involve the removal of various drips and tubes that were put in during the operation. You will now start to feel more free and able to walk around, without the fear of pulling something out. We will assess whether you can swallow safely and tell you when you can gradually start eating and drinking.

The team looking after you will work with you and your family and friends to prepare you for leaving the hospital. We realise that every person is different and everyone will achieve the goals at their own pace. This table is for you to make a note of the day you reached the goals or targets, for your own reference and to let you see your progress.

Goal/Target	Post-operative day achieved
Sit out of bed for majority of the day, returning to bed for a 1 to 2 hours rest in the afternoon	
Walk independently along the ward	
Get dressed in your own clothes (unaided)	
Once swallow is safe, building up to drinking and eating (pureed diet)	
Independent with speech and swallowing exercises	
Gained confidence with speech (see scale below)	

### Confidence in speaking:



# Leaving Hospital

The Enhanced Recovery Programme is based on criteria-led discharge and when you have achieved all the criteria, it is time for you to leave hospital.

*The criteria are listed below*

*(Please tick when achieved – this is for your reference only).*

<b>Discharge criteria</b>	<b>Tick when achieved</b>
Assessed as medically fit for discharge	
Effective pain control with oral analgesics (tablets or liquids)	
Managing a pureed diet (food of smooth consistency with no lumps) and drinking fluids	
Received dietary advice for after discharge	
Bowels opened	
Independently mobile; able to get self out of bed and on/off toilet	
Met with physiotherapist and given neck and shoulder exercises	
Received Fit note (sick note) <i>if required</i>	

## Notes:

## **Notes:**

## **Notes:**

# Enhanced Recovery Team

My Consultant is .....

My Specialist Nurse is .....

My Speech and Language Therapist is .....

My Dietitian is .....

My Enhanced Recovery Nurse is .....

My Physiotherapist is .....

## Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Review: February 2027  
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[www.ouh.nhs.uk/information](http://www.ouh.nhs.uk/information)



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# ERAS Patient Experience Questions

We would like to understand how you felt about your recent stay in hospital and would be grateful if you could answer the following questions. Your answers will be treated confidentially. We value your input in helping us look at ways of improving our service.

**Thank you.**

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**Do you feel the Enhanced Recovery After Surgery programme improved your recovery?** (please **tick** one answer)

Yes

No

**If no, what were the reasons?**

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**Did you feel being on the Enhanced Recovery After Surgery programme allowed you to be involved in your recovery?**

(please **tick** one answer)

Yes

No

I did not need to be involved

Don't Know

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**Were there any parts of the Enhanced Recovery After Surgery programme that you felt were not relevant for you?**

(please **tick** one answer)

No

Yes

**If yes, what parts did you feel were not relevant?**

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**If you were seen by the ERAS physiotherapy team, do you feel you were seen regularly enough?** (please **tick** one answer)

Yes – I was seen enough

Yes – but I would have liked to be seen more

Yes – but I would have liked to be seen less

No – I was not seen

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**How well do you think your pain was managed after your surgery?**

*Poorly managed*

*Adequately managed*

*Very well managed*

1

2

3

4

5

6

7

8

9

10

---

**How much do you feel your swallowing limits your day to day activities?**

*Not at all*

*A little*

*Often*

*A lot*

1

2

3

4

5

6

7

8

9

10

# ERAS Patient Experience Questions

**Did you find the Enhanced Recovery After Surgery patient information leaflet useful?**  Yes  No

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**Did this make you feel** – (please **circle** the most appropriate words)

well informed   prepared   in control   confident   happy  
supported   unclear   unprepared   out of control   anxious  
stressed   unsupported   frustrated

---

**Did you find the Enhanced Recovery After Surgery Patient Diary useful?**  Yes  No

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**Did this make you feel** – (please **circle** the most appropriate words)

well informed   prepared   in control   confident   happy  
supported   unclear   unprepared   out of control   anxious  
stressed   unsupported   frustrated

---

**Did your overall care experience make you feel** –  
(please **circle** the most appropriate words)

well informed   prepared   in control   confident   happy  
supported   unclear   unprepared   out of control   anxious  
stressed   unsupported   frustrated

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**If you could change one part of the Enhanced Recovery programme, what would it be?**

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**Do you have any other comments?**

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After completion, tear this page out of the booklet and leave on the hospital ward before you are discharged home.

Thank you.

*Partial Glossectomy or Buccal Resection with reconstruction*