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The Royal Liverpool  
and Broadgreen  
University Hospitals  
NHS Trust

## Patient information

# Staging Laparoscopy

Surgical Division Royal Liverpool Hospital and Broadgreen Hospital

### **Your Consultant / Doctor has advised you to have a staging laparoscopy**

#### **What is a staging laparoscopy?**

It is a diagnostic procedure that allows the doctor to look inside the abdomen.

#### **What are the benefits of having a staging laparoscopy?**

This procedure will allow your doctor to examine your abdominal organs, take samples (biopsies), and look for signs of disease or abnormalities.

**The aim of the staging laparoscopy is to help your doctor to determine if further surgery is possible.**

#### **What are the risks of having a staging laparoscopy?**

As with any procedure there is a small risk of complications. You may have some minor bleeding or bruising around the cuts in the skin of your abdomen. Any more personal risks involved with the procedure will be discussed in more detail, and you will have time to consider these before you sign the consent form.

#### **Are there any alternatives available?**

Your doctor would be happy to discuss alternatives if they are applicable to you.

#### **What will happen if I decide not to have treatment?**

You may choose not to have the procedure, and in that case we will discuss any alternative options of staging your disease or abnormalities.

#### **What sort of anaesthetic will be given to me?**

You will be given a general anaesthetic. General anaesthesia is drug-induced unconsciousness: it is always provided by an anaesthetist, who is a doctor with specialist training.

Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain. Complications are very rare, but can cause lasting injury: they include awareness, paralysis and death.

There is a risk of damage to teeth, particularly caps or crowns and veneers. Your anaesthetist will take every care, but occasionally damage can occur.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

For more information, please ask for a copy of the leaflet **“You and Your Anaesthetic”** (PIF 344).

You will be given an opportunity to discuss anaesthetic options and risks with your anaesthetist before your surgery.

**If you are worried about any of these risks, please speak to your Consultant or a member of their team.**

### **Getting ready for your operation**

- You will usually be seen in the pre-operative clinic before you are admitted to hospital. Here you will have blood tests, and sometimes a heart trace or a chest X-ray. You will be assessed to see if you are fit for the anaesthetic.
- The staff will ask routine questions about your health, the medicine you take at the moment and any allergies you may have.
- You will be given instructions on eating and drinking before your operation.
- You will be able to discuss the operation with a doctor. You will be asked to sign a consent form to say you understand the procedure, and what the operation involves.

### **The day of your operation**

- You will come into hospital on the day of your operation. You will receive a letter to tell you to go to ward 11z at 7.30.
- Please leave all cash and valuables at home. If you need to bring valuables into hospital, these can be sent to General Office for safekeeping. General Office is open between 8.30 and 4.30 Monday to Friday. Therefore, if you are discharged outside these times we will not be able to return your property until General Office is open. The Trust does not accept responsibility for items not handed in for safekeeping.
- Please bring any medication you take into hospital with you.
- Please bring in toiletries, nightwear and towels.
- You will be asked to remove jewellery - plain band rings can be worn but they will be taped.
- Please leave body piercings at home. False nails and nail polish will also need to be removed if worn.
- If you are on regular medication, you will be told to take this if necessary.
- You will be asked to put on a gown and disposable underwear.
- A bracelet with your personal details will be attached to your wrist.

- You may be prescribed some medication to take before your operation by the anaesthetist. A member of the nursing staff will give this to you.
- A nurse and porters will take you to the operating theatre.
- Your dentures, glasses or hearing aid can stay with you on your journey to the operating theatre.
- When you arrive in the theatre area, the ward nurse will leave you, and you will be asked to put on a disposable hat.
- You will then be taken to the anaesthetic room and a member of theatre staff will check your details with you (at Broadgreen Hospital there is a slight difference in the way you will be received in theatre due to the different theatre layout).

### **What should I expect after my operation?**

- After your operation you will be kept in the theatre recovery room before being transferred to the ward.
- A nurse will check your pulse, blood pressure, and breathing rate regularly. **It is important that if you feel any pain you must tell the nursing staff, who can give you painkillers to help.**
- The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick. If you feel sick we advise you not to drink until this feeling has passed. The nursing staff may offer you an injection to help this sick feeling go away.
- The first time you get out of bed, please make sure you ask a nurse to be with you. This is in case you feel dizzy.

### **How is it the staging laparoscopy done?**

Once you are asleep a small incision (cut) is made just above or below your naval (belly button), through which the laparoscope (instrument to look into the abdomen) is gently inserted. A second incision in the abdomen is then made, through which instruments are used to allow the organs to be moved and samples taken.

Carbon dioxide gas is also pumped into your abdomen. The gas is harmless and it is used to slightly inflate the abdominal wall and separate the organs so they can be seen more easily. After the procedure the gas is let out of your abdomen and the small incisions are stitched.

### **Pain relief and medication**

After a laparoscopy it is normal to feel some pain and discomfort around the incisions made in your abdomen, this will get better after a couple of days. You may feel some pain in your shoulders.

This is because the nerves that supply the shoulders also supply the diaphragm, the breathing muscle in your chest. Sometimes the diaphragm can get irritated or stretched during the procedure, which is why you feel pain in the shoulders.

The nursing or medical staff will advise you about which painkillers to take if you need them.

## **Your wound**

You will have clips in where the incisions have been made, before you go home you will be given advice on how to keep the wounds clean and when the clips need to be removed.

## **Getting back to normal**

Remember you have just had an operation. It is normal to feel more tired than usual for a few days afterwards.

## **When can I resume normal activities?**

It takes a few days to recover from a diagnostic laparoscopy. Follow your surgeon's advice regarding resuming physical activity, rest and returning to work

## **Further appointments**

You will be sent a clinic appointment for about a week after your test for your results or your Clinical Nurse Specialist will contact you.

## **Feedback**

Your feedback is important to us and helps us influence care in the future

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## **Further information**

### **Upper Gastrointestinal Clinical Nurse Specialist**

**Suzanne Ball**

**Tel: 0151 706 4704**

**Text phone number: 18001 0151 706 4704**

**Or Tel Main Switchboard Tel: 0151 706 2000 ask for bleep 5232**

### **Upper Gastrointestinal Clinical Nurse Specialist**

**Kieran Murphy**

**Tel: 0151 706 4704**

**Text phone number: 18001 0151 706 4704**

**Or Tel: Main Switchboard 0151 706 2000 and ask for bleep 5231**

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