

ERAS bedside checklist

Please note that this is a suggested plan and some patients may require a modified plan.

Plan		Check as complete
Pre-op	Check patient aware of enhanced recovery aims and anticipated progress (patient information booklet and physio advice sheet)	
	Based on confirmed theatre time, encourage diet until 6 hrs pre-op and clear carbohydrate drink 8 hrs and 2 hrs pre-op (check with anaesthetist)	
Post op day 0	Encourage oral intake as soon as able with aim to stop IVF early	
	Fluid balance as per team plan	
	Offer oral analgesia, laxatives and anti-emetics	
Day 1	Out of bed for meals with aim for 4hrs chair and circulatory exercises	
	Encourage normal diet as tolerated with access to independent snack trolley	
	Oxycodone MR by 0800 to allow PCA to come down 1000 Paracetamol QID Oxycodone IR as required (with laxatives)	
	walk supervised (aim for 20m)	
	walk supervised (aim for 40m)	
	Encouragement of deep breathing (described in physio sheet) Refer physio if on-going O2 requirements or high risk	
	Weight	
	Start self-medication discussion	
Day 2	Out of bed for meals with aim for 6 hours in chair	
	Encourage normal diet as tolerated with access to independent snack trolley	
	PCA down and regular oral analgesia	
	60m walk	
	60m walk	
	Encouragement of deep breathing	
	Weight	
	Self medication	
Day 3	Change into home clothes	
	Catheter out if no concerns about bladder function	
	6 hours in chair	
	60m walk	
	60m walk	
	60m walk	
	Weight	
	Routine physio review	
Self medication		
Day 4	Aim for discharge with advice sheet, medication, information on phone numbers if concerns and anticipated follow-up calls	
	Weight	
	Complete self medication	
	Catheter out if anuria pre-op or high risk TWOC	
	Independent mobilisation +/- stair assessment	

All suggestions for improvement welcome to Rachel.thomas@nhslothian.scot.nhs.net