



Patient & Family Guide
2019

Your Craniotomy



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Your Craniotomy

This pamphlet will help you learn about your craniotomy surgery. The word craniotomy means “opening of the skull.”

If you have any questions after reading this pamphlet, please ask a member of your health care team.

Before surgery

- Patients who need this surgery are often admitted through the Emergency Department or transferred from another hospital.
- Others may have their appointment booked ahead of time and come to the hospital from home on the day of their surgery.
- If your surgery is planned ahead of time, you may be asked to visit the Pre-Admission Clinic. When you come for this appointment, please bring all of the medications (including vitamins, natural health products, and over-the-counter medications) you take in their original bottles or containers.

Before your surgery, you will need to have:

Blood tests

- Blood work may be done before surgery to make sure all of your blood values are within normal limits.
- **If you do not wish to have a blood transfusion for any reason, please tell your doctor or nurse before your surgery.** Your doctor will talk with you about your options.

Anesthetist visit

You may see an anesthetist (doctor who puts you to sleep for surgery). This may not be the same anesthetist who actually puts you to sleep on the day of your surgery.

Consent

Your doctor will talk with you and your family about your surgery.

They will explain:

- › the procedure
- › possible risks
- › how long it will take to do the surgery

- You should have all of your questions answered before you or your family (if you are not able to) sign the consent form. It may be helpful to write down your questions before you talk with your doctor.
- After your questions have been answered, you will be asked to sign the consent form. This gives your doctor permission to do your surgery.
- **You will be asked to not eat or drink anything for at least 6 hours before your surgery.**
- The anesthetist may ask you to not take certain medications (including vitamins, natural health products, and over-the-counter medications) the night before and/or morning of your surgery. They may also order certain medications for you to help you relax and/or help put you to sleep.

Morning of surgery

- If you are coming from home, please do not bring any valuables with you, such as jewelry or money. The hospital is not responsible for the loss of any item.
- You will be asked to report to the Same Day Surgery Unit on the 5th floor of the Halifax Infirmary site. Enter at the Robie Street entrance and use the elevator to the left.

Hair

Before surgery, you may wash your hair with regular shampoo. Your hair will not be cut or shaved until you are asleep in the Operating Room (OR). Your hair will grow back.

Craniotomy surgery

- You will be taken to the OR on a stretcher.
- The anesthetist will place an intravenous (IV) in your arm. This is a small plastic tube that the medications will be given through to put you to sleep.
- During the surgery, your family may wait in the Neurosurgery Waiting Room on 7.3 or on the 5th floor. Brain surgery can take several hours. The surgical liaison nurse may visit your family to tell them about your progress. As soon as your surgery is over, your doctor will go to the waiting area to give your family a report.

Tissue for testing

The doctor may take a tissue sample for testing during your surgery. The results are usually ready in 7-10 days. Your doctor will talk about the results with you.

After surgery

After your surgery, you will be taken to the Intensive Care Unit (5.2), or to the Neurosurgery Intermediate Care Unit or Neurosurgery Unit (7.3). We will move your belongings to one of these areas when you go to the OR.

What can I expect when I return to the unit?

When you are well enough, you will be moved back to the unit. We will choose the best room for you based on how much care you need.

Deep breathing exercises

You may be asked to do deep breathing exercises. This will help to clear your lungs after surgery.

Routine checks

- Your nurse will continue to check your blood pressure, temperature, pulse, pupils (centres of your eyes), and leg and arm movements. They will ask you questions to check if you are alert. For example, your nurse may ask, “Can you tell me where you are now?”
- These routine checks tell the nurse how well your brain is working.

Nutrition

- You may or may not have an IV. This will give you fluid until you are able to drink. Once you are eating and drinking well, the IV may be removed. If you need IV medications, it may have to stay in longer.
- Your nurse may measure how much you are drinking. This helps to make sure you are getting enough fluid.
- If you are having trouble swallowing, a dietitian may be consulted. They may put you on a modified diet to help keep you from choking on your food. This will be reassessed every couple of days until you are able to return to your regular diet. If it is not safe for you to eat/drink, a tube may be put down your nose into your stomach to make sure you are getting the proper nutrition.

Bowel and bladder care

- You may or may not have a catheter (drainage tube from the bladder) to drain urine (pee). It will be removed as soon as possible after surgery.
- After it is removed, your nurse may ask you to measure your urine for a few days. This is to make sure your bladder is emptying properly.

- You may notice a change in your normal bowel movements (going to the bathroom). This is normal and can be because of changes in diet, stress, and medications. Please tell your nurse if you are having stomach cramps or if you have any other concerns. It is important to deal with bowel problems early. You may be instructed to take medications to help move your bowels (poop).

Your incision

- After surgery, you will have a bandage over your incision (cut). Your doctor will tell you when to take it off. After it is removed, your incision may be left open to the air to heal. Do not touch it or put anything over it.
- Your incision may have staples or sutures (stitches), which will need to be removed by your family health care provider in 10-14 days. If you have dissolvable sutures, these will go away on their own within 3-4 weeks and do not need to be removed.

Hygiene

- You can shampoo your hair 3-5 days after surgery. Shampoo gently using regular shampoo. Do not scrub the incision site.
- Your nurse will help you with your personal care. It is important for your recovery that you try to do as much as possible for yourself.

Activity and therapy

- For your safety, do not get out of bed on your own until you have checked with your nurse. Your nurse will tell you when you are able to get up on your own.
- A physiotherapist and an occupational therapist may also be consulted to help you with your recovery. Your family may be asked to visit during your therapy sessions so they can learn how to help you recover faster.

Comfort

- You may have a headache. Please tell your nurse when you are having pain. Pain medications can help and should be given early so that your pain does not become severe (very bad).

- You may have an upset stomach and feel nauseous, like you might throw up. This may be due to the anesthetic (medication to put you to sleep during surgery) or other medications. Please tell your nurse so that they can give you medication to control your nausea.

How are you feeling?

While you are in hospital, you must tell your nurse if you are feel unusual, such as:

- › nervous
- › sleepy
- › dizzy
- › “funny”
- › uncomfortable or in pain

After you go home, call your surgeon or family health care provider if you have any:

- › unusual feelings
- › vision problems
- › weakness in your arms and/or legs
- › trouble speaking
- › more or severe (very bad) headaches
- › redness, swelling, drainage, or a foul smell from the incision site

Rehabilitation

Your health care team will talk with you about what kind of care you will need at home before you are discharged from the hospital. You may need to stay at the Nova Scotia Rehabilitation Centre for a short time to make sure you are functioning as independently as possible.

Looking for more health information?

Find this pamphlet and all our patient resources here: <http://library.nshealth.ca/PatientGuides>

Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.

Please do not use perfumed products. Thank you!

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The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider.

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The information in this pamphlet is to be updated every 3 years or as needed.