

Lung Resection Recovery after Surgery

Nurse Reference Sheet

This information corresponds to the patient education factsheet Lung Resection Recovery after Surgery.

Post-Operative Day (POD)	Patient Care	Pain Management	Physical Activity	Drain Care
Day of Surgery	<ul style="list-style-type: none"> NPO until swallow test for pts >75 years or with swallow trouble CXR Labs drawn Electrolyte protocol ICU glucose scale At least 2L O₂ 	<ul style="list-style-type: none"> Epidural PCA Multimodal pain regimen 	<ul style="list-style-type: none"> Dangle feet at bedside Move to chair if possible 	<ul style="list-style-type: none"> Chest tubes on wall suction Dressings PRN Avoid Vaseline gauze or Xeroform gauze
POD 1 (Transfer out of ICU)	<ul style="list-style-type: none"> ADAT Restart PO home meds (except ACE inhibitors, blood thinners) O₂ titrated to sats above 90% (88% COPD) Saline lock IV when tolerating PO 	<ul style="list-style-type: none"> Epidural PCA Transition to PO 	<ul style="list-style-type: none"> Sit in chair at least 2 times Walk in hall at least 2 times 	<ul style="list-style-type: none"> Chest tubes on wall suction, water seal when walking Dressings PRN
POD 2	<ul style="list-style-type: none"> ADAT Continue O₂ titration 	<ul style="list-style-type: none"> Epidural weaned Transition to PO 	<ul style="list-style-type: none"> Sit in chair at least 3 times (during meals) Walk in hall at least 3 times (goal: 1 mile) 	<ul style="list-style-type: none"> Chest tubes to water seal One chest tube removed (possible) OR dressings removed from VATS/thoracotomy site; keep open to air if dry
POD 3 (Possible discharge home)	<ul style="list-style-type: none"> Advance diet as tolerated May shower; cover chest tube sites and keep tubes as dry as possible 	<ul style="list-style-type: none"> Oral pain meds only 	<ul style="list-style-type: none"> Sit in chair at least 3 times (during meals) Walk in hall often (goal: more than 1 mile) 	<ul style="list-style-type: none"> Chest tubes to water seal All chest tubes removed (possible) Dressings PRN
General Information	<ul style="list-style-type: none"> Hospital discharge goal between POD 3-7 Chest tube locations: Anterior medial tube = anterior apical site; Posterior tube = posterior apical site; Middle tube = middle inferior basilar site Chest tube dressings: Change Q48 hours and PRN; Avoid Vaseline gauze and Xeroform gauze on incision (Vaseline/Xeroform gauze must still be present at bedside). After chest tube removal, leave gauze and foam tape dressing on for 48 hours. May leave incision open to air after 48 hours unless draining. 			