



Patient shared care plan





Name:

Date of transplant:





Enhanced recovery after surgery (ERAS) is a programme that has been used widely by the NHS in other surgical programmes and has shown excellent results. It is designed to help you recover from your liver transplant operation as quickly and comfortably as possible, while reducing the risk of complications. We hope that this journal will help you to understand what to expect and feel involved in what happens during your transplant in-patient experience.

To optimise your recovery after your transplant, it is important that you are involved in your own care. We will provide you with daily goals, such as getting up and about soon after surgery to reduce complications such as chest infections and blood clots. Being well informed and taking an active role in your care will improve your overall experience following your liver transplant.

This shared care plan is yours to keep and use to record your progress. Relatives, friends, and the transplant team can help you to complete it if you find this difficult. Completing this plan each day will help the team to support you and ensure that your recovery is as smooth as possible.

Don't worry if you do not meet all your targets. Everyone is different, and the team will support you to achieve your targets at a pace that is right for you. The team will adapt the programme where needed, to ensure that you receive high quality care, and we will not discharge you from the hospital until both you and the transplant team feel you are ready.

Here is some information for you about the targets you should be aiming for within the first few days after you wake up from your operation. Please remember that everyone's recovery is different so please do not worry if it takes you longer to reach the milestones set out below.

Positioning

You should be sitting in an upright position in bed as much as possible.

Your nurse should assist you into a chair as soon as you are ready, this can be as early as day 1 or 2 after your surgery.

You should be aiming to spend a little longer in your chair each day, breaking the day into 2 or 3 shorter periods in the chair is often more comfortable, for example for mealtimes.

If able, aim to mobilise with a healthcare professional, who will support you and your attachments as required.

Pain relief

It can be helpful to score your pain to help monitor your pain relief. Your nurse may ask you to do this throughout your stay in intensive care.

You should aim to be comfortable enough to take a deep breath, cough and transfer in and out of bed. If pain is stopping you from doing any of these important things, please tell the nurses as there are lots of ways the team can help to keep you comfortable.

Breathing exercises

It is important that you try to clear your chest in the first few days after transplant, using the Active Cycle of Breathing Technique (ACBT) You should be familiar with ACBT from your pre-operative information



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pack and had the opportunity to practice however the team will support and guide you with this throughout the first couple of days.

Please use the QR code for a video demonstration of ACBT if needed:



Nutrition

When you have a liver transplant operation, your body needs enough nutrition to allow it to heal. Not enough of this can lead to complications such as problems with wound healing and can make your recovery time longer. It is important to start eating and drinking as soon as you are able. Sometimes the transplant team will need to give you nutrition using a tube in your nose or with special nutritional drinks. The team will guide you with what is right for you.

Enhanced Recovery After Surgery in Transplantation

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When you wake up after your transplant (the first 24hrs or so), the team will help you with these activities

Positioning

Try to sit up



Breathing exercises



Stand and step



Every day in ICU

Positioning

Try to sit up in bed



Sitting out in your chair

The team will help you to sit out in a chair if you are able to



Walking

The team will help you to stand and step on the spot or walk short distaces if you can



Enhanced Recovery After Surgery in Transplantation



Nurses, family or friends can help you to record your progress

First 24hrs awake	Are you managing to drink water? Can you start to eat yet? Have you managed to sit up or get out of bed?		
Day	Food and drink		
	Number of walks: Distance: Time spent in chair (hours/minutes): Pain score: 0 No pain 1-3 mild pain 4-6 moderate pain 7-10 severe pain		
Day	Food and drink		
	Number of walks: Distance: Time spent in chair (hours/minutes): Pain score: 0 No pain 1-3 mild pain 4-6 moderate pain 7-10 severe pain		
Day	Food and drink		
	Number of walks: Distance: Time spent in chair (hours/minutes): Pain score: 0 No pain 1-3 mild pain 4-6 moderate pain 7-10 severe pain		





Transferring to the transplant ward

Leaving intensive care

When you no longer need the support of the intensive care unit, you will transfer to the ward. This is where you will be able to focus on your recovery and rehabilitation.

The ward you are on specialises in caring for patients with liver transplants. They will let you and your family know about visiting times. Family, and friends can help you with your recovery. There is a consultant ward round every day and other members of the team are never far away if you need them. If something is worrying you, let the team know.

You can play an important part in your own recovery by paying attention to your nutrition and your mobility.

You will be encouraged to be as active and engaged in your care as much as you can. The team will work with you to set your rehabilitation targets and support you to achieve these. A daily routine on the ward will help to encourage you to get up and dressed and move around. Please remember that everyone's experience is different, and some days will be easier than others.

The dietetic team will continue to monitor your nutrition and assess which type of nutrition is right for you. The overall goal will be making sure you are meeting your nutritional needs as soon as possible. This will allow your body to recover after the surgery. Try to manage as much as you can at each meal and any nutritional drinks you are given. Snacks between meals can also help. Let the team know if you are finding this difficult.

Checklist for transfer to ward

- What are your goals for today and tomorrow?
- Are you able to cough, take deep breaths and move?
- How is your pain? Do you know what your pain relief options are?
- Do you feel sick?
- Is there a plan for your catheter to be removed?
- Have you told your family or friends that you are moving to the ward today? Do you have the ward contact details?
- If you are unsure about the answer to any of these questions above, let the team know.



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On the transplant ward





















On the transplant ward

Day of transfer to ward	Breathing exercises	Try to sit in chair	Walks
	00		
		Aim for (hr/day):	Aim for: Target distance:
Day	Sitting out in a chair	Walks	Exercise programme
	Aim for (hr/day):	Aim for: Target distance:	
Day	Sitting out in a chair	Walks	Exercise programme
	Aim for (hr/day):	Aim for: Target distance:	
Day	Sitting out in a chair	Walks	Exercise programme
	ÅII		
	Aim for (hr/day):	Aim for: Target distance:	

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Breakfast	Snacks / Nutritional drinks	
Lunch		
Evening meal		
How many walks did you manage today? Wa	lks Metres	
How much time did you spend sitting in your chair?		
What was your pain control like today? (Please circle)	
Pain score: 0 no pain 1-3 mild pain 4-6 moderate pain 7-10 severe		
Did you make any progress today? Is there anything	making this difficult? Talk to the team.	





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Lunch				
Evening meal				
How many walks did you manage today? Wa	lks Metres			
How much time did you spend sitting in your chair? Minutes				
What was your pain control like today? (Please circle)				
Pain score: 0 no pain 1-3 mild pain 4-6 moderate pain 7-10 severe				
Did you make any progress today? Is there anything making this difficult? Talk to the team.				





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Evening meal		
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How much time did you spend sitting in your chair?	Minutes	
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Pain score: 0 no pain 1-3 mild pain 4-6 mode		
Did you make any progress today? Is there anything making this difficult? Talk to the team.		





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Did you make any progress today? Is there anything	making this difficult? Talk to the team.	



As you prepare to leave hospital





















Leaving hospital

When you are ready to be discharged from hospital, it is still important to keep track of your progress, especially your nutrition, and your mobility progress.

The team will give you advice on how to keep moving and build up your strength at home.

When you do leave hospital, you may also find it useful to continue to document your progress in the early days after discharge. (You can use the progress pages at the back of this shared care plan for this if you wish)

When you have left the hospital, don't forget, you are not alone. If you are worried about something before your next appointment, you can still contact the transplant team by calling the following numbers:



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Leaving hospital

Being discharged from hospital after a liver transplant operation can sometimes feel overwhelming. This is common and you are not alone. If there is anything worrying you, please discuss this with the team before you leave.

Leaving the hospital is the start of a long journey of recovery, often with some challenges along the way. Having a transplant can be an emotional experience and the transplant medications can also affect your mood. There are lots of support services available, offering a wide range of practical, social and emotional support. Ask the transplant team what's available.

We have listed some links you may find useful below:

British Liver Trust

www.britishlivertrust.org.uk

or call 0800 6527330

LiverNorth

www.livernorth.org.uk

or call 0191 3702961

NHS Blood and Transplant

www.nhsbt.nhs.uk/organ-transplantation/liver



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Explanation of terms

Some of the language used in hospital can be unfamiliar and cause confusion. Here are some explanations for some of the common words used.

Consultant ward round

This is the same as a ward round but will be led by a consultant surgeon or medic that will visit you to review your progress. They will talk to you about how you are, answer your questions and may examine you if needed.

Drain

A tube coming from the transplant wound to remove blood and fluid that collects from the operation. It is connected to a bag that can be emptied so that the fluid volumes can be measured.

Dietitian

Dietitians are qualified health professionals that assess, diagnose and treat dietary and nutritional problems. The dietitian you will see specialises in managing patients before during and after liver transplantation. They will help you to meet your nutritional needs as you recover from your transplant. This is an essential part of your transplant recovery and can help you to progress more quickly and prevent complications.

ERAS (Enhanced recovery after surgery)

The name of the programme we are following to better support you as you recover from your operation.

Nasogastric tube

(Also referred to as NG tube, feeding tube)

A plastic tubing device that sits in your nose and passes directly into the stomach. This can sometimes be used to help with the removal of stomach contents after the operation or to give you fluids, medications and liquid food (see tube feed).



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Nutrition

The process of providing or obtaining the food necessary for health and growth. This is particularly important when recovering from a liver transplant. Failing to obtain enough nutrients causes malnutrition. This can lead to complications such as problems with wound healing and can prolong your recovery time.

Nutritional drinks

Special drinks to give you the right balance of protein, carbohydrates, fats, vitamins and minerals and can help you to recover from your surgery.

Transplant team

A team of health professionals who specialise in caring for patients before, during and after liver transplantation. This includes Transplant surgeons, Liver medicine doctors, anaesthetists, dietitians, physiotherapists, social workers, nurses, healthcare assistants and others.

Transplant ward

When you no longer need the close monitoring of the ICU/HDU, you will be transferred to the ward where you will be supported by the specialist transplant team to continue your recovery.

Tube feed

(Also referred to as nasogastric feed, enteral nutrition)

When you are not able to get enough nutrition by eating and drinking, you may need liquid nutrition, given via a tube inserted into your nose (see Nasogastric tube)

Urinary Catheter

A thin tube that is inserted into the bladder to carry urine away. This usually happens when you are asleep during the operation and helps to empty the bladder whilst you wake up from the operation

Ward round

This refers to a team of health professionals that will visit you as part of their regular rounds, visiting all their patients. This may include a variety of people. It usually includes doctors, nurses, and can include other people from the transplant team. They will talk to you about how you are, answer your questions and may examine you if needed. These are held on a regular basis, but times can vary depending on workload. You can ask any member of the transplant team if you would like to know more about usual ward round times.



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