- You will go home with prescriptions for pain medicine to take by mouth. You may take these if needed in the first couple of weeks after your surgery for incisional pain.
- Do not take any over-the-counter (non-prescription) medicine including vitamins, herbs, and supplements without referring to the "Over-the-Counter-Medication-Guide" in your Transplant Binder. Please call the transplant team if you have questions.
- Never stop taking your anti-rejection medicine and never adjust the dose without first speaking to your transplant coordinator or doctor. If you vomit after taking your pills and do not see any medication in the vomit, do not repeat your doses. If you see your meds, you can try taking the pills again. If the vomiting continues, call your Transplant Coordinator.

 Bring your medication card to every clinic visit so all changes can be documented on the medication card in pencil.

Follow-up Care

- You'll need to see one of your doctors on a weekly basis for the next 6 weeks. You will be given your first six weeks of follow-up appointments at the time of discharge. You will also need to have your labs drawn twice a week for six weeks in this initial post-transplant period.
- It is also very important that you receive good, routine health care and that you take certain precautions when receiving care. Please refer to the important section on Other Health Care Providers in your Transplant Binder.

Danger Signs

• Sometimes, complications can occur. Depending on the type of surgery you've had, please watch for the following "danger signs." If any of these occur, please call your Transplant Coordinator right away. During non-office hours, someone is available 24 hours a day, 7 days a week at 617-632-9700. The page operator will contact the on-call RN and MD for you. For emergencies, always call 911.

Kidney, Liver, or Pancreas Transplant

- temperature of 101 degrees or higher
- severe diarrhea, nausea, stomach cramps or vomiting
- redness, swelling, or pain around the incision
- bright red or foul-smelling discharge coming from the wound
- new onset of swelling in your face, hands, or feet, and/ or shortness of breath
- flu-like symptoms, such as chills, joint pain, headache, being very tired
- problems with urination, such as pain, burning or very frequent urination
- high blood sugars over 400 (If you are being discharged from the hospital on insulin, please also refer to the handout that you received from your inpatient nurse.)
- productive cough associated with fever or chills
- shortness of breath associated with chest pain (Call 911)

Liver Transplant

 you may not have any symptoms at all of a liver transplant rejection

Kidney Transplant

- swelling in the hands or face
- decreased urine output
- tenderness over the kidney

Pancreas Transplant

- any blood sugar reading over 200
- tenderness over the pancreas







General Discharge Instructions

Transplant Patient Education Videos

The BIDMC Transplant Education Committee would like to inform you of an educational resource for you and your support circle. Those who are caring for, or who have received a transplant, are encouraged to view the DVD provided in the hospital and/or visit the BIDMC Transplant Institute Website via the following address and click on header entitled "Transplant Patient Education Videos:

www.bidmc.org/transplantvideos

Let's Talk Transplant: Survival Skills for Life with Your New Organ

The purpose of this video is to provide you with "survival skills" for returning home after your transplant. We encourage you to view these sessions with your family and friends. Topics that will be covered include general surgical discharge instructions, medications and post-transplant diet for all solid organ recipients.

This program has been developed to enhance your learning. It is not all inclusive. It is meant to be used in addition to the transplant patient education binder, "Caring for your Transplant," and the education you receive by your transplant team. Your team consists of medical and surgical doctors, nurses, pharmacists, social workers and in many cases, nutritionists, physical therapists and others.

Your transplant team hopes to provide guidance and support to you and your family as you move forward in your transplant process.

Please make sure to call your transplant coordinator with any questions or concerns you may have. Thank you for your attention. Best Wishes!

The BIDMC Transplant Education Committee

For 24/7 needs, please contact the Transplant Institute Lowry Medical Office Building, 7th floor 110 Francis Street, Boston, MA 02215 617-632-9700

After Your Transplant Surgery

This sheet goes over some common questions or concerns you or your family may have after your transplant surgery. If you have additional questions or don't understand something about your operation, please call your nurse coordinator.

Continuing Your Recovery

This "Transplant Binder" has a lot of detailed information on recovering from transplant surgery. Please take the time to read it. A member of your family or someone else who helps you at home may want to read it as well. Some of the important points to remember in order to ensure success in your recovery include:

- You will need to have a blood pressure monitor, thermometer, and scale in preparation for discharge.
- Weigh yourself and take your temperature and blood pressure at the same time every day. Record the results on your daily record. Call your doctor if you have a temperature of 101 or higher, or if your weight goes up more than 3 pounds in 2 days.
- We will let you know if you will need to check your blood sugars at home and/or administer insulin.
 Liver transplant recipients need to take prednisone for approximately 2 months post-transplant. Some kidney transplant recipients may need to be on prednisone post-transplant as well. Prednisone can cause increased blood sugars.
- Remember to call your transplant coordinator with any abnormal vital signs or elevated blood sugars.
- Plan ahead to make sure you never run out of antirejection medicine. It is best to call your pharmacist 5-7 days in advance so your meds will be in stock and ready before you run out.
- Call your Transplant Coordinator, Monday –
 Friday during business hours for medication refills.
 However, if you require a refill over the weekend
 for your anti-rejection medication, please contact
 the On-Call Transplant Coordinator do not wait
 until Monday. Be advised- sometimes it is difficult
 to get these medications over the weekend because
 of insurance issues. PLAN AHEAD.
- Tell your doctor right away if you can't take your medicine. For example, if you are nauseated or

- if there is another reason you cannot take the medicine, tell your doctor at once.
- If you must be near someone who has a cold or flu, remember that frequent hand-cleaning is the best way to prevent the spread of germs. Both you and the person who is sick should clean hands frequently, either with soap and water, or if there is no visible soil on the hands with an alcoholbased hand cleaner.
- Do not smoke. Smoking makes you more prone to getting a respiratory infection and makes it more likely for your new organ to fail in the future.
- If you need any immunizations (for travel or for routine care), make sure you do not get any "live virus" immunizations. The doctor or nurse giving you the immunization will be able to tell you whether or not it contains live virus. Always check with your transplant team.
- You should not get any vaccines within 3 months post-transplant and/or within 3 months post-treatment of a rejection episode. The annual flu vaccine injection is encouraged as long as you are 3 months beyond your transplant.
- You may also have certain dietary restrictions. Please refer to the nutrition section for dietary guidelines. Because of your medication, you are more prone to infection from food sources.
- It's important to talk to your doctor about whether
 you can have any alcohol. People who have had
 a liver transplant cannot have any alcohol at all
 as this may damage your new liver transplant.
 People who have received a kidney or a pancreas
 transplant may be able to have an occasional
 alcoholic drink after three months. Always check
 with your doctor.
- Do not eat grapefruits or drink grapefruit juice, as this can affect how some of the transplant medications work in your body.

Activity

- Do not drive until you have stopped taking pain medicine and feel you could respond in an emergency
- You may climb stairs.
- You may go outside. Avoid traveling long distances.

- Don't lift more than 10-15 pounds for 6 weeks. (This is about the weight of a briefcase or a bag of groceries.) This applies to lifting children, but they may sit on your lap.
- You may start some light exercise when you feel comfortable. Refer to the section in your binder on Activity Guidelines for further information.
- In most cases, swimming is OK after 4 to 6 weeks, as long as the incision is completely healed. Before you swim, please check with your transplant team to make sure it is okay.
- Heavy exercise may be started after 6 weeks, but use common sense and go slowly at first.
- You may resume sexual activity whenever you feel ready.
- For anyone, spending a lot of time in the sun can make you more likely to get skin cancer. The medicines you are on make you more likely to get cancer from the damaging effects of sun exposure. Avoid spending long periods of time in the sun. When you are in the sun, use sunscreen at all times. Wear a wide-brimmed hat and long sleeves.

How You May Feel

- You may feel weak or "washed out" for 6 weeks. You might want to nap often. Simple tasks may exhaust you.
- You may have a sore throat because of a tube that was in your throat during surgery.
- You might have trouble concentrating or difficulty sleeping. You might feel depressed.
- You may find you have a poor appetite or that food doesn't taste the same. This is related to your new medications. It will get better in a few weeks.
- All these feelings and reactions are normal and should go away in a short time. If they do not, tell your nurse or doctor.

Your Incision

- Your incision may be slightly red around the stitches or staples. This is normal.
- You may gently wash away dried material around your incision.

- If you have steri-strips (thin paper strips that might be on your incision), do not remove them for 2 weeks. But if they fall off before that, it's okay.
- It is normal to feel a firm ridge along the incision. This will go away.
- You may feel some numbness around your incision.
 This is normal.
- Avoid direct sun exposure to the incision area for 6-12 months.
- Do not use any ointments or powder on the incision unless you were told otherwise.
- You may see a small amount of clear or light red fluid staining your dressing or clothes. If the staining is severe, please call your Transplant Coordinator.
- You may shower. No tub baths until your wound has fully healed and is closed. Please check with your nurse if you have questions.
- Over the next 6-12 months, your incision will fade and become less prominent.

Your Bowels

- Constipation is a common side effect of medicine such as Percocet or codeine. If needed, you may take a stool softener or a gentle laxative. Please refer to the "Over-the-Counter-Medication-Guide" in your Transplant Binder.
- If you have difficulty or pain moving your bowels, please call your Transplant Coordinator.
- If you get diarrhea, don't take anti-diarrhea medicines. Drink plenty of fluids but avoid Gatorade or other electrolyte supplements as these could cause serious lab abnormalities. If the diarrhea does not get better in 1-2 days, please call your Transplant Coordinator.

Medications

• Follow the medicine schedule as outlined on the medication card you were given in the hospital. Do not take medicines you used to be on if they are not on your new medicine schedule. If you are not sure about what medicines to take or not to take, call your transplant coordinator. You need to be very clear on what medicines to take and when to take them.