Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Surgery and Travel

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Surgery and Travel

Patient Information

Pre-operative Department

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Pre- and post-operative Guidance for Patients flying or travelling long distances by car, bus, or train

What is a DVT/PE?

A DVT (Deep Vein Thrombosis) is a blood clot which occurs within the deep veins of the legs due to prolonged sitting. Which after long periods of time can reduce blood flow, encouraging clots to form and blocking blood flow back to the heart. A PE (Pulmonary Embolism) is a clot within the lungs. A PE occurs from a DVT which has travelled from your legs to your lungs within your bloodstream.

Risk of a DVT when you travel

When travelling for long periods (four hours or more) whether that be by plane, bus, car or train with prolonged sitting and a reduction in your movement (reduced walking) your risk of developing a DVT is doubled. This is also true if you take multiple flights over a short period of time. Your risk may remain high after travel for as long as four weeks, although it is unlikely to develop a DVT through travel.

Factors which may increase your risk of a DVT

- You have had a blood clot in your legs or lungs previously
- Thrombophilic disorder (increased risk of blood clots)
- Cancer
- You have had surgery recently or been through a recent physical trauma

- Immobility (reduced or no movement for one or more days)
- Age (60 plus)
- Oestrogen use including oral contraceptives
- Pregnancy
- If you sit in the window seat on a plane as you are less likely to get up and walk around reducing the blood flow in your legs
- Obesity (Body Mass index (BMI) of 30 or more)

What is BMI and how it is worked out

BMI (Body Mass Index) is used to determine if you are within the correct weight limits for your height. To work out your BMI you divide your weight in kilograms by your height in metres squared. Your BMI will be worked out at the pre-operative assessment clinic before surgery. There are also tools online to work out an approximate BMI. Please feel free to ask for your BMI from the staff at the pre-operative assessment clinic.

Pre-operative travelling guidance

If travelling for four hours or more before surgery a scoring system, which you can find below, has been devised to help our team in the pre-operative assessment clinic and yourselves to work out how long your surgery may need to be delayed. However, please remember the scoring system is a rough guide and you will be assessed on an individual basis.

VTE/DVT Scoring System) This is a score that reflects your risk of developing a thrombosis)

Factors	Score
Age 60 or older	1
Weight BMI 30 or greater	1
Active cancer or undergoing cancer treatment	2
Thrombophilic disorder (blood disorder increased risk of clots)	1
Pregnancy or 6 weeks post giving birth	1
Dehydration	1
If you are on HRT or Tamoxifen	1
Varicose veins with inflammation of vein (phlebitis)	1
Acute infectious disease (viral or bacterial)	1
Health problems such as hypertension, diabetes, stroke, heart and lung problems	1

You have had a blood clot in your legs or lungs in the past (DVT/PE)	2
Parent, sibling or offspring has had a DVT/PE in past	1
You are having lower limb surgery lasting longer than 60 minutes	2
You are having general surgery lasting longer than 90 minutes	1
YOUR TOTAL SCORE	

Score 0 = delay of approximately one week

Score of 1 = delay of approximately two weeks

Score of 2 plus = delay of approximately four weeks

However if you are having emergency or urgent surgery, this will be assessed by the nurses either at pre-operative assessment or within the hospital with guidance from surgeons and anaesthetists.

Post-operative travelling guidance

The guidance outlined below is a rough guide put in place by the Civil Aviation Authority, to be used when travelling four plus hours by plane, car etc. following an operation. Again, these are rough guidelines and are assessed on an individual basis. The length of the

surgery and any reduction in mobility needs also to be considered.

- Keyhole Surgery - wait 24 hours post operation
- Abdominal surgery - wait 10 days
- Simple cataract or corneal laser surgery - wait 1 day
- Complicated eye surgery (eye muscle surgery or retinal detachment without the gas bubble) - wait 7 days
- Retinal detachment (if having a gas bubble put in eye) - wait 2 - 6 weeks
- Dental surgery- wait 2-5 days
- Colonoscopy (camera to look into your bowel) - wait 1 day
- If you have had a plaster cast applied, and flights are less than 2 hours - wait 1 day. If flights are longer than 2 hours - wait 2 days
- Joint replacement (hip/knee) or removal of all or part of lung - wait 3 months
- Tonsillectomy- wait 10 days or less due to bleeding risk at 7-10 days
- Middle ear surgery wait 9 days if less than 9 days need certificate from ENT specialist.
- Breast surgery – wait 24 hours
- Breast Reconstruction with implants advised not to fly for 6 months
- Simple peno-scrotal surgery and cystoscopies: wait 24 hours
- TURP (Transurethral Resection of Prostate) / TURBT (Transurethral Resection of Bladder Tumour) / ureteroscopy: wait 7 days

All of the above are a rough guide and are assessed on you as an individual and any health

issues you may have.

We would **ALWAYS** advise if flying after an operation to check with your individual airline as all airlines have their own guidance on flying after surgery. Also make sure your travel insurance providers are informed and please be aware this may increase the price of travel insurance for cover abroad.

Recommendation to reduce your risk of DVT when flying:

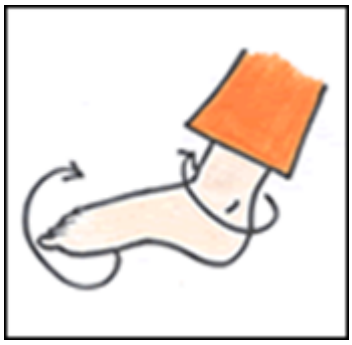
- Make sure you get up and walk about regularly when permitted by the staff on the aircraft. If you have a window seat, especially make sure you walk around regularly. Don't feel like you are troubling people.

- Try to complete calf muscle stretches - as shown in pictures below every half hour.

- Make sure you drink plenty fluids.

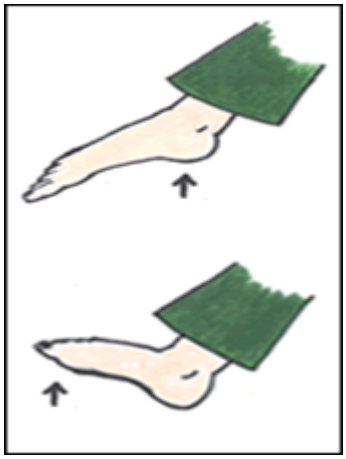
- If recommended wear below the knee compression stockings.

1 Foot Circles. Lift your feet off the floor. Moving both feet together draw an imaginary circle with each big toe, so that each foot rotates about the ankle joint. Continue several times in one direction, and then repeat in the other direction.



2. Heel lift/Toe lift. Start with your feet flat on the floor. Lift your heels as high as is comfortable while leaving your toes and the balls of your feet on the floor. Lower your heels and repeat several times. Now leave your heels on the floor and gently lift your toes and the

front of your feet off the floor, thus flexing your ankle as far as is comfortable. Lower and repeat several times.



Contact information

To contact a Pre-operative Assessment Nurse telephone:

Leigh	01942 264234 or 01942 264235
Wigan	01942 774691 or 01942 774692
Wrightington (for orthopaedic surgery)	01257 256340

Or please call our switch board on 01942 244000, asking for the Eye Department at Boston House if any questions related to eyes, or any other specific department you may need.



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