



**University  
Hospitals Sussex**  
NHS Foundation Trust

# Welcome to Level 9A West

Patient information

# What is this information about?

## This information is about:

- Staying on the abdominal surgical ward, Level 9a West.
- Who is looking after you on the ward.
- Visiting.
- Going home.
- Looking after yourself at home.

# Why have I been given this information?

You have been given this information to prepare you for your stay on this ward. We understand that a stay in hospital can be a difficult time for you and your family. We want to give you the best possible care.

It is also important to know how to look after yourself once you leave hospital. Keep this information in a safe place, so you can look at it when you get home. It will help you to understand your recovery, and what you will be able to do in the weeks after your operation.

You can share this information with anyone looking after you, so they know how to support you in hospital and when you get home.

# Who stays on Level 9A West?

Level 9A West is also called L9aW. It is a ward with 35 beds for male and female adult patients. These patients need surgery for abdominal problems. This surgery can be emergency surgery, or elective (non-emergency) surgery.

We treat people with cancer and benign (non-cancer) conditions. We also look after people with abdominal injuries from trauma and conditions affecting the gallbladder and pancreas.

## Who is in charge of L9aW?

There is a team of health care professionals involved in the care of patients on the ward.

The Ward Manager is Sarah Francis. She wears a navy-blue tunic with red epaulettes (shoulder decorations). She is responsible for the daily running and management of the ward. She works four days a week and is available on extension 67224.

Sarah is managed by the Matron for L9aW. This is Sam Harden. She covers several wards across two sites but is usually based on L9aW two days a week. She can be contacted through the switchboard.

## Who will be looking after me?

Each shift is led by a ward sister or charge nurse in a navy-blue tunic or a senior staff nurse in a pale blue tunic. The nurse in charge will carry a phone. The extension number for this is **62040**.

For each shift you will have a named nurse responsible for your care. The nurses wear pale blue tunics and are supported by a health care assistant in grey tunics. We also have nursing associates who wear royal blue uniforms. They should introduce themselves to you at the start of their shift.

## Who else will I meet?

- Doctors, pharmacists and possibly Macmillan nurses. These staff do not wear uniforms.
- Physiotherapists, occupational therapists and student nurses who all wear white tunics.
- Dieticians who wear mauve polo shirts.
- Catering and domestic staff wear grey polo shifts or uniforms.

To help you to identify all the people looking after you, and for security reasons, all members of staff wear a name badge with their photo on it.

## **What can I bring with me?**

Please only bring essential items as space is limited. Ask your visitors to take home any unused items. We will ask you to sign a disclaimer to take responsibility for your property.

We recommend that you leave anything valuable at home. This includes jewellery, money or credit cards. This is because we cannot keep them secure on the ward.

## **Can I have my own room?**

There are three single rooms on L9aW. These are given to patients who need them the most, usually patients who have infectious conditions.

## **Can I have my curtains around me?**

We leave the curtains open around the beds so that staff members can always see their patients. This keeps you safe.

You always have a right to dignity, privacy and to be treated with sensitivity. The curtains will be closed when the nurse is caring for you, or any other times that you need privacy.

Please ask for a chaperone (another person to be present) if you want when you have any examinations done. This can include personal hygiene care and care to do with bodily functions.

## When can visitors come to see me?

Visiting times on L9aW are from 10am to 8pm every day.

Because space is limited, and because we need to respect the needs of everyone on the ward, we do not allow more than two visitors at one time.

Because of the risk of infection, visitors should not sit on the beds. Please do not bring flowers or soft toys on to the ward.

## Can children visit?

L9aW may not be the most suitable environment for young children. If they do visit, please make sure that other patients are not disturbed.

## When is the best time for my family or friends to call the ward to find out how I am, and what are the contact details?

Please remember that the ward is a very busy place. The staff are working to give patients the best care possible. They may not always be able to answer the phone.

It is helpful if there is one person that staff can contact about you. This person can also ring the ward to find out how you are. All other family members or friends can communicate with that one person.

The morning is our busiest time, so please call after 11.00am.

Telephone numbers for L9aW are:

**01273 696955** Bays 4-6: Ext. **64499** or **64498**

Bays 7-9 plus side rooms: Ext. **67221** or **67222**

We cannot give out detailed information about patients over the phone. Please do not ask staff to do this. This is in line with the Data Protection Act.

## **Can I use my mobile telephone?**

Yes, but please use your mobile phone thoughtfully. Do not let it disturb others or interrupt your care. Please keep them on silent mode.

## **Should I try to move around and do things for myself while I am in hospital?**

Yes. While you are in hospital you will be encouraged to do as much as possible for yourself and to try and mobilise (move around) frequently. This will help you to recover more quickly. Nursing staff will be here to help you.

## **When are meals served?**

Mealtimes are approximately:

**Breakfast:** 8.00am

**Lunch:** 12.00pm

**Supper:** 5.00pm

If you have any special dietary requirements, please let us know.

Hot drinks are served between mealtimes and water jugs are changed two or three times a day.

## **How are my religious needs met?**

Please tell us of any spiritual needs you may have.

Our multi-faith chaplaincy services can provide comfort and support to all, whether you are religious or not.

## How is my care organised?

The staff on L9aW will make sure that you are included in all decisions about your care.

- Every morning and evening, the nursing staff will change shifts. When they change shifts, they will hand over your care to each other. They will talk about your care at your bedside. You are a part of these discussions. You can listen, ask questions and contribute.
- Each day the medical staff will visit you on the ward round. They will be discussing your care with you and making management plans. Please ask questions if you are not sure about anything. Nothing will happen to you without your involvement and consent.
- We have specialist teams and services to help you deal with many of the problems that illness and a stay in hospital might bring. You can tell any of the nursing staff about any problems. If they cannot help you, they will find someone who can.

## What about going home?

Before leaving the hospital, we will have already discussed your discharge plans with you or your family and people looking after you. If you have any issues at home that may delay your discharge, please tell the nursing staff so we can help you.

Before you go home, please discuss any concerns you have about your discharge with us. When you are nearly ready to go home, the doctors will prepare a letter for you and your GP.

### **This includes:**

- Important information about your stay in hospital and what happened while you were here.
- Any future treatment plans.
- Who to call for advice once you leave (should it be necessary).
- The prescription for any medicines to take with you.

## **What happens on the day that I go home (am discharged)?**

We recommend you wear normal loose day clothes to go home in.

Before leaving the hospital, you will be taken to the discharge lounge. This is on the ground floor of the Louisa Martindale Building. You can still have meals and treatment while you are waiting to go home in the discharge lounge.

Transfer to the discharge lounge speeds up the process of leaving hospital. It means that you get to go home quicker and allows us to admit emergencies earlier in the day. This helps us to reduce overcrowding in our emergency department.

## **What should I do if I have concerns after I leave hospital?**

It is important you know what signs to look out for. If you are worried about anything, please contact your GP. You may also find your Macmillan Nurse (if you have one) can help you.



## What about my wound?

You will either have one incision (cut) in the middle of your abdomen, or three or four small incisions.

It is not unusual for your wounds to be slightly red, uncomfortable or numb to begin with.

If your wound is not healed when you leave us, we will arrange for you to see your practice nurse at your GP surgery. If you are house bound, you will see your community nurse.

### Be aware

Occasionally infections develop in the wound so please telephone your GP if your wounds become inflamed, swollen or start to discharge fluid or pus. The community nursing team may need to be involved if you have ongoing wound care needs.

## What should I do if I have any abdominal pain?

It is common to feel some discomfort when you leave hospital after your operation.

If you are discharged with painkillers, you only need to take them until you can perform normal activities without significant discomfort.

If you are discharged without painkillers, but have discomfort, you can take simple painkillers such as paracetamol.

### Be aware

If you have severe pain lasting for more than two hours, have a fever, or feel generally unwell you should contact your GP.

## Will my bowel habits (how often I poo) change after my operation?

Your bowel habits (doing a poo) may change after part of your bowel is removed. For most people, their bowels settle down a few weeks after surgery. However, you may not go completely back to the usual bowel habit you had before your operation.

- If you become constipated and have not had your bowels open (done a poo) for three or more days, take a gentle laxative. You can buy this at any pharmacy.
- If your bowels are loose and watery you should discuss it with your GP.
- If you have diarrhoea, avoid drinking only water and drink fluids like squash or soup.

## If I have a stoma, how should I look after it?

If you have a newly formed stoma, you will be visited by a stoma care nurse in the community.

If you have any worries about your stoma, please look at your stoma care booklet for advice or talk to your stoma care nurse.

If your stoma output is watery then you need to make sure that you are not getting dehydrated (drinking enough liquid).

If you feel unwell, are thirsty or are passing concentrated (dark) urine, or your stoma stops working you should contact the stoma care department or the ward for advice.

## **Stoma Nurse Specialists**

Telephone: **01273 696955 Ext. 64215** (24-hour answer machine).

Email: **[Bs-u-tr.stomacaredepartment@nhs.net](mailto:Bs-u-tr.stomacaredepartment@nhs.net)**

Please leave your name, hospital number or date of birth and a contact telephone number so they can call you back.

## **What should I do if I am nauseous (feeling sick) or vomiting (being sick)?**

If you cannot keep any fluid down for more than 12 hours, because you feel sick or are sick, contact your GP.

## **What can I do when I get home?**

Please remember that your body needs time to recover after your operation. It has been through trauma. Many people are surprised at the length of time it takes them to get over their operation. It is important to listen to your body and use common sense.

Most people find it helpful to have a little rest or sleep in the afternoon when you first get home.

By six to twelve weeks, you will probably be back to normal except for heavy lifting or vigorous sports.

## **What should I eat to help my recovery?**

We recommend that you eat a balanced, varied diet and eat three or more times a day.

You may find some foods upset you and cause loose stools (diarrhoea). If this is the case avoid these foods for the first few weeks. You may find our booklet 'Information about your diet after surgery on your gut' useful.

If you find it difficult to eat it is still important to get enough protein and calories to help your body to heal. You may benefit from having regular nourishing drinks. This includes full cream milk, homemade milkshakes or supplements like Meritene or Complan. These can supplement your food. You can buy these in most pharmacists and health food shops.

We recommend alcohol is avoided during your recovery for the first six weeks.

If you are losing weight without trying you should discuss this with your GP. You may need to be referred to a dietician.

## **Can I have a shower or bath when my wound is healing?**

If your wound is healing well, you may bath or shower and get your wound wet without causing any harm. Do not soak in the bath for too long.

## **Can I still do exercise and hobbies?**

Common sense should guide your exercise and rehabilitation.

- If you plan to restart an exercise like jogging or swimming, wait until two weeks after your operation. Build this up gradually.
- Do regular exercise several times a day. Gradually increase this for the four weeks after your operation, until you are back to your normal level of activity.
- Do not do any heavy lifting until six weeks after your operation.
- Once the wound has healed and you are pain free, you can usually do most activities.

## When can I go back to work?

Many people can return to work within two to four weeks following their operation.

If you have a heavy manual job, then we advise you not to do heavy work until six weeks after your operation.

## Will I be able to drive again?

The DVLA's (Driver and Vehicle Licensing Agency) advice about driving after surgery is as follows:

If you decide to drive, you must think about the following things:

- How well you are recovering from your operation.
- How well you have recovered from your anaesthetic.
- If the painkillers that you take have side-effects that affect your driving.
- If your operation means that you are physically restricted.
- If you have any underlying conditions that might affect your driving.

It is your responsibility to make sure that you are always in control of the car. You should be able to prove this to the police if they stop you.

Check your insurance policy before returning to drive after surgery. Most insurance companies do not cover you to drive for six weeks after major abdominal surgery.

You can find further information on the DVLA website here:

[www.gov.uk/surgery-and-driving](http://www.gov.uk/surgery-and-driving)

## What behaviour is expected of patients and visitors?

In line with the published hospital policy any patient or visitor who is offensive, threatening or violent will be referred to the hospital security service. So will any person found to be smoking, drinking or using illicit drugs.

The hospital has a no smoking policy on hospital grounds.

## Who can I contact for further information and advice?

Telephone numbers for Level 9A West are:

**01273 696955**      Bays 4-6: **Ext. 64499 or 64498**

Bays 7-9 plus side rooms: **Ext. 67221 or 67222**

Nurse in charge: **Ext. 62040**

Ward Office: **Ext. 67224**



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